

CONFIDENTIAL

CANADIAN ARMED FORCES MEDICAL ENVELOPE

Cpl Sgt

SURNAME KELLICHUK

CHRISTIAN NAMES ALEXANDER

NO. 15113

RANK R.A.C.

SERVICE R.C.A.F.

TABLE I MEDICAL CATEGORY

Table with columns: DATE, PLACE, CATEGORY, PROFILE (YOB, etc.), OTHER FACTORS, SIGNATURE OF M.O. Includes entries for Clinton, Aylmer, and GENT.

TABLE III SHICK TEST & DIPH. TOXOID

Table with columns: DATE, PLACE, POS, NEG 1, NEG 6, SENSITIVE, SIGNATURE OF M.O. Includes entries for Aylmer and GENT.

TABLE VI TABT

Table with columns: DATE, PLACE, AMOUNT, SIGNATURE OF M.O. Includes entries for Aylmer and GENT.

TABLE II CHEST X-RAY AND MEDICAL CHECK

Table with columns: DATE, PLACE, CHEST X-RAY, MED. CHECK, SIGNATURE M.O. Includes entries for Aylmer, Clinton, and GENT.

TABLE IV DICK TEST & S.F. TOXIN

Table with columns: DATE, PLACE, POS., NEG., SIGNATURE OF M.O. Includes columns for S.F. TOXIN, AMT., and REACTION.

TABLE V OTHER IMMUNIZATION

Table with columns: DATE, PLACE, TYPE, AMOUNT, SIGNATURE OF M.O. Includes entries for Aylmer and GENT.

TABLE VII VACCINATION (SMALLPOX)

Table with columns: DATE, PLACE, REACTION, SIGNATURE OF M.O. Includes entries for Aylmer and GENT.

INTERNATIONAL BLOOD GROUP RECORD OAB OR AB

NIGHT VISION CAPACITY SCORE & DATE

COLOUR VISION ISHIHARA DATE LANTERN DATE

429-488-018

SURNAME *KALICHUK* CHRISTIAN NAMES *ALEXANDER* NO. *15113* RANK *Lt Col*

TABLE VIII CONTENTS ALL DOCUMENTS ON INSERTION ARE TO BE LISTED BELOW

Cancelled by AFPO 142/57

DATE	PLACE	FORM NUMBER	ENCLOSURE NUMBER	DATE	PLACE	FORM NUMBER	ENCLOSURE NUMBER	DATE	PLACE	FORM NUMBER	ENCLOSURE NUMBER
Nov 50	Clinton	Mus 1	1	30 NOV 65	Clinton	2024	24	2/1/69	Clinton	LAB	46
"	"	Mus 2	2	✓	✓	2033	25	✓	✓	✓	47
"	"	Mus 30	3	✓	✓	✓	✓			Audio	48
"	"	Sero	4	6 OCT 66	✓	2024	26			Sero	49
12 Feb 51	"	TSivo	5 ^{AYD}	✓	✓	Audio	27				
9 MAR 51	"	R78A	6	✓	✓	ECCG	28				
9 MAY 52	Clinton	MF30	7	✓	✓	2033	29				
18-9-52	Clinton	Xray A	F	250566	✓	2007	30				
21 Dec 54	Blanton	ISM17	9	24 Nov 66	DVA	7553	31				
28 Aug 57	✓	Sero	10	24 Nov 66	Clinton	2007	32				
4 Sep 57	✓	15420	11	27 Feb 67	✓	2001	33				
9 May 59	St. Lyl.	ISM 6	12	28.5.57	✓	2007	34				
21 July 59	Agyl.	ISM 6	13	✓	✓	2039	35				
"	"	ISM 1	14a-c	✓	✓	626	36				
10 Nov 64	CENT	M59A	15	7 Dec 67	✓	ECCG	37				
10 Nov 64	✓	DND 2024	16	✓	✓	2024	38				
10 Nov 64	✓	DND 2033	17	✓	✓	Audio	39				
10 Nov 64	✓	ECCG	18	19 Dec 67	✓	2033	40				
13 Nov 64	✓	DND 2013	19	27.6.68	✓	2039	41				
25 Jan 65	✓	DND 2024	20	✓	✓	2007	42				
27 Jan 65	✓	DND 2001	21	✓	✓	626	43				
30 Nov 65	Clinton	Audio	22	23 Nov 68	✓	ECCG	44				
✓	✓	ECCG	23	✓	✓	2024	45				

RC 9
Militia - F.P. 1576A
RCAF-M10 (Revised)
15M-2-50 (6250)

(2)

CANADIAN ARMED FORCES
MEDICAL ATTENDANCE RECORD 429 488 018

Name KALICHUK Surname ALEXANDER Christian Names Number 15113

Rank or Rating LAC SGT Duty or Trade Supply Tech 911

Date of Enlistment 24 Jan 50 Date of Birth 3 Nov 23 Religion R.C.

Next-of-Kin Mr. Frank Kalichuk (Father)

Address Next-of-Kin Sifton, Manitoba.

Pulhems, Profile, Category
 on Enlistment

ARMY

Y	O	B	P	U	L	H	E	M	S

AIR

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CATEGORY A 4 B

1. This booklet is to be created for each member of the armed forces at the time of enlistment and placed in his Medical Envelope.
2. Entries are to be made for all Sick Parade Attendance (MIR, Sick Bay or Sick in Quarters) and will include dates of dispatch to and return from hospital.
3. **No entries** are to be made for attendance on inoculation, vaccination and other immunization parades.

Date	Unit	Complaint, Examination and Diagnosis	Treatment and Disposal	M.O's Initials
27 May 57	Clinton	T. 98.4° Decorative D. mch 2 days Recently installed.	Catalpa Becton B3	[Signature]
29 May 57	Clinton	T. 98° Healing well.	D.D. 7	[Signature]
16 June 59	AYL	Admit	_____	[Signature]
28 Apr 64	Cent	Spontaneous single retachia D eye - sclera @ 5 o'clock.	M.D.	[Signature]
25-1-65	Cent.	T. 99.4 Pulse 140 B.P. $\frac{175}{72}$ Drinking on week-end. Last evening sudden onset of sharp epigastric pain. Has been vomiting since - vomitus contains specks of blood.		
8 Dec 65	Clinton	O/R Pulsatily tender mass in epigastric Pain in rt. elbow & arm P.T. [unclear] Advised [unclear] [unclear] [unclear] Exam PT X 2 days on call elbow feet both	Admit	[Signature]
5 June 68	Clinton	Eyes bothering after reading any length of time. Last 2 years has also @ esophagus.		[Signature]

Date	Unit	Complaint, Examination and Diagnosis	Treatment and Disposal	M.O.'s Initials
12 Feb 68	Clinton	T - 98.2 Productive cough, sore throat, runny nose, chills, sweats last few days - chest clear & A/P X-ray - heavy workup. B. artificial, Tetracycline Kamex & Budesol.		M.W.
10 Feb 69	✓ Clinton	T - 99.4 Runny nose, sore throat, non prod cough. B. artificial, Kamex, Budesol, AIA		M.W.
14/3/69	Clinton	Still runny nose, aggravating cough at night. Wadts eyes rechecked for muscle imbalance B. artificial, Budesol, Depacel Refer 2/28 ophth.		M.W.
28/4/69		Sore throat. Venicles & ingert on Lymphadenopathy tonsillar nodes - BGS - Pen Vee (20) Artificial (2) Budesol. (20) ATTC 1 X (2) R		M.W.

LABORATORY REPORT ENVELOPE

NAME

SERVICE NUMBER

WARD OR SERVICE

DATE FILE STARTED

ISM 9E

DVA-TS 105E

000828

DRAFTS (NAVY ONLY)

DATE

SICK BAY

000829

**LABORATORY
REQUISITION**

BIOCHEMISTRY

SERVICE

INSTITUTION

BASE SURGEON
CFB CLINTON

WARD

OP

30 Jan 69

✓
MW

~~KALICHUK~~ KALICHUK A

SURNAME, GIVEN NAMES

RECORD NO.

SERVICE NO. (OR RANK)

SGT 018

DATE OF BIRTH

SPECIMEN: BLOOD

CLINICAL NOTE OR DIAGNOSIS:

EXAMINATION REQUESTED:

SGOT
ALKALINE PHOSPHATE
LIVER FUNCTION, CC FLACULATION

B Wilton MD (Maj)

M.O. 1/e of CASE

000830

Blood	Glucose, AC	mg %	PC	mg %	Creatinine	mg %
	B.U.N./N.P.N.	mg %	CO ₂ Comb. P.	mEq		
Serum	Sodium	mEq	Potassium	mEq	Chloride	mEq
	Calcium	mg %	Bilirubin	0.8 mg %	Bil. Direct	mg %
	Proteins	g %	Albumin	g %	Globulins	g %
	Phosphate	mg %	Phosph'ase, Alk.	14.4 U.	Phosph'ase, Acid	U.
	Ceph. Chol. Fl.		Thymol Turb	3.6 U.	Thymol Fl.	
	B.S.P. Ret'n	%	Cholesterol	mg %	Uric Acid	mg %
	Amylase	U.	Transaminase	U.		
C.S.F.	Glucose	mg %	Chlorides	mg %	Proteins	g%

OTHER TESTS:

S. G. O. T. 50

FEB 6 1969

Date Received

BIOCHEMISTRY

Date

000831

**LABORATORY
REQUISITION**

BIOCHEMISTRY

SERVICE

INSTITUTION

KALICHUK, A.

WARD

C.F.B.
CLINTON

RECORD NO.

SURNAME, GIVEN NAMES

SERVICE NO. (OR RANK)

DATE OF BIRTH

SPECIMEN:

CLINICAL NOTE OR DIAGNOSIS:

C.C.F. 24 hrs. +
48 hrs. ++

EXAMINATION REQUESTED:

FEB

000832

Blood	Glucose, AC	mg %	PC	mg %	Creatinine	mg %
	B.U.N./N.P.N.	mg %	CO ₂ Comb. P.	mEq		
Serum	Sodium	mEq	Potassium	mEq	Chloride	mEq
	Calcium	mg %	Bilirubin	mg %	Bil. Direct	mg %
	Proteins	g %	Albumin	g %	Globulins	g %
	Phosphate	mg %	Phosph'ase, Alk.	U.	Phosph'ase, Acid	U.
	Ceph. Chol. Fl.		Thymol Turb	U.	Thymol Fl.	
	B.S.P. Ret'n	%	Cholesterol	mg %	Uric Acid	mg %
	Amylase	U.	Transaminase	U.		
C.S.F.	Glucose	mg %	Chlorides	mg %	Proteins	g %

OTHER TESTS:

Date Received

BIOCHEMISTRY

000833
Date

MEDICAL BOARD PROCEEDINGS RAPPORT D'EXAMEN MÉDICAL

PART I
 PARTIE I

Station or Place
 Base ou endroit **CFB CLINTON INFIRMERY** Date **29 Apr 69**

Reason for Medical Board Proceedings
 Raison de l'examen médical **RELEASE AUTHORITY CFHQ DPI/RP 4657 282030Z Apr 69**
Release OR&O 15.01.4 (a)

Force **CF(A)** Rank **SGT** Service No. **129 488 018**
 Grade **SGT** Matricule **129 488 018**

Surname **KALICHUCK** Given Names **ALEXANDER**
 Nom **KALICHUCK** Prénoms **ALEXANDER**

Ship, Unit (or Establishment)
 Navire, unité (ou établissement) **CFB CLINTON** Present Trade **SUP. TECH**
 Spécialité actuelle **SUP. TECH**

Date of Birth **3.11.23** Former Civilian Trade **Farmer**
 Date de naissance **3.11.23** Métier civil antérieur **Farmer**

Profession or Occupation
 Profession ou emploi

Permanent Home Address **RR #4 Walton Ont.**
 Adresse du domicile permanent

Record of all Service (Record Chronologically)
 État de services complet (consigner chronologiquement)

Force	Number Matricule	Rank Grade	DATE		Theatre of Operations Théâtre d'opérations
			From - Du	To - A	
CA(R)	H77067 429-488-	Pte	May 43	Jan 46	France, Belgium, Germany, Holland
CAF	018	Sgt	Jan 50	Present	Canada

History of Service obtained from: Man's Statement Service Documents Both
 Antécédents militaires obtenus par les déclarations du militaire

PART II - PRESENT DISEASES OR INJURIES (to be filled in by the President of the Board)
 PARTIE II - MALADIES OU BLESSURES ACTUELLES (à remplir par le président du bureau médical)

Present Diseases or Injuries (If multiple, list in order of importance) Maladies ou blessures actuelles (S'il y en a plusieurs, les indiquer par ordre d'importance)	International Code No. N° de Code	Place of Origin Lieu	Date of Origin Date
Non-medical Release			

PART III - STATEMENT OF PRESENT COMPLAINTS (Individual's own words)

Have you any trouble resulting from any disease or injury. If so, state what it is, when it started, and what you think was the cause.

PARTIE III - EXPOSÉ DES PLAINTES (Par l'individu concerné)

Souffrez-vous de malaises résultant d'une maladie ou d'une blessure quelconque? Si oui, dites en quoi ils consistent, quand ils ont commencé et quelle en est la cause, selon vous.

No

Witness: BW Wilton MAJ

Signature: A Kalichuk SGT

Previous to joining the service did you suffer from any disease or injury mentioned in the above answer? If so, give details and dates as to hospital and doctor.

Avant de faire partie des forces armées, avez-vous souffert des maladies ou blessures mentionnées dans la réponse ci-dessus? Si oui, donnez les détails et les dates d'hospitalisation et de soins médicaux.

No

Witness: BW Wilton MAJ

Signature: A Kalichuk SGT

PART IV - HISTORY OF PRESENT DISABILITY

This section should contain a detailed history of the origin of all diseases and injuries described in Part III or otherwise discovered. Past history and family history, if relevant, is to be included.

PARTIE IV - ANTÉCÉDENTS DE L'INVALIDITÉ ACTUELLE

La présente section doit contenir un compte rendu détaillé de l'origine de toutes les maladies et blessures décrites dans la partie III ou découvertes d'une autre façon. Il faut inclure les antécédents personnels et familiaux, s'il y a lieu.

RCAF MLO:

- (1) Fractured nasal bones Feb 51 (encl 5)
- (2) Psychoneurotic anxiety reaction July 59 (encl 14)
- (3) Acute alcoholic gastritis Jan 65 (encl 21)
- (4) Presently complaining of epigastric burning before meals and at nights. Referred DVA GU clinic.
- (5) To be admitted May 13 for recession of external rectus OU.

BW Wilton MAJ

PART V

PHYSICAL EXAMINATION - Before completing this section, the subject of the survey will be stripped and given a complete physical examination. All defects must be recorded and if indicated specialist's opinion obtained and attached hereto.

Height: Ft. 5 Ins. 8 $\frac{1}{2}$ Weight. 155 lbs. Weight on enlistment. 141 lbs.

EXAMINATION	NEG	POSITIVE FINDINGS AND REMARKS
Vision: s Glasses R <u>20/20</u> L <u>20/20</u>	<u>X</u>	
c Glasses R /.....L /.....	
c + 2.50 R /.....L /.....	
c + 1.50 R /.....L /.....	
Colour Vision: Plates.....	<u>CVN</u>	
Lantern.....	
Hearing: WV-R..... L.....	<u>H-2</u>	by audiogram
CV-R..... L.....	
Ears: Tym. Mem. R..... L.....	<u>X</u>	
Nose	<u>X</u>	
Mouth and Teeth.....	<u>X</u>	
Throat	<u>X</u>	
Head and Neck.....	<u>X</u>	Florid countenance
Spine.....	<u>X</u>	
Extremities Upper.....	<u>X</u>	
Lower.....	<u>X</u>	
Hernia.....	<u>X</u>	
Genitalia.....	<u>X</u>	
Anus and Haemorrhoids	<u>X</u>	
Varicosities	<u>X</u>	
Abdomen.....	<u>X</u>	liver 4f below RCM, firm tenderness in epigastrium
Joints	<u>X</u>	
Chest: Min. <u>35</u> Max. <u>37</u>	<u>X</u>	
Lungs	<u>X</u>	
Heart	<u>X</u>	
Blood Pressure: S <u>150</u> D <u>90</u>	<u>X</u>	
Pulse Rate. <u>100</u>	<u>X</u>	
Lymphatic Glands.....	<u>X</u>	
Ductless Glands	<u>X</u>	
Skin	<u>X</u>	
Tremors.....	<u>X</u>	
Pupils: L and A.....	<u>X</u>	
Reflexes	<u>X</u>	
CNS Including Emotional Status	<u>X</u>	

Chest X-ray No. 8510 Report Normal

Serological Test No. 036 Type VDRL Report Negative

Urinalysis: Sugar. Neg Albumin. Neg Microscopic Neg

Other Laboratory or X-ray Reports (specify)

ECG April 14 - Normal

X-RAY REQUISITION AND REPORT

SURNAME <i>Kalichuk</i>		FIRST NAME AND INITIALS <i>W. J. ...</i>		SERVICE NO. <i>129 422 018</i>
RANK <i>Sgt</i>	SERVICE <i>(Colon)</i>	AGE <i>45</i>	PARENT UNIT <i>CFB CHINTO</i>	
X-RAY DEPARTMENT AT:			REPORT TO BE FORWARDED TO: (OFFICE)	

CLINICAL INFORMATION AND DIAGNOSIS:

Release medical

EXAMINATION REQUESTED:

Routine Chest

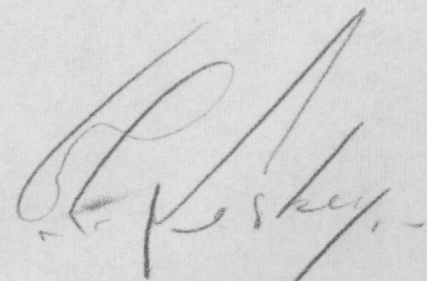
IF ROUTINE CHEST	TECHNICIANS USE ONLY		
ADMISSION <input type="checkbox"/>	14 X 17 ✓		
ENROLMENT <input type="checkbox"/>			
RELEASE <input checked="" type="checkbox"/>			
ANNUAL <input type="checkbox"/>			
SERVICE REQ. <input type="checkbox"/>	10 X 12		
	8 X 10		
DATE	M.O.'S SIGNATURE <i>B.W. WILTON</i>	FILM NO. <i>8510</i>	DATE OF EXAMINATION <i>14 APR 69.</i>

P.A. Chest.

No change from a film of Nov 22/68. Lung fields do not suggest any active lung disease.

Some lobulation of the right dome of the diaphragm. A few small calcified densities in the hilar regions. Pleural spaces are clear.

Heart chest ratio is 13.2/32.4.



Wm. L. Teskey, M.D. C.R.C.P. (C)
RADIOLOGIST

im 15.4.69

Summary of Positive Findings:

- (1) Enlarged liver
- (2) Tenderness in epigastrium
- (3) Exotopia ~~OU~~ OU

YOB V CV H G O A

Grade or Category
 Considered by Examining MO 23 1 1 2 2 2 5

April 30 1969
 (Date)

BW Wilton MAJ
 (Signature of MO Bringing Board Forward)

PART VI - RECOMMENDATION OF MEDICAL BOARD (Treatment required and disposal)
 If treatment required specify nature and probable duration.

Fit for non medical release

BW Wilton MAJ

<p>PART VII NAVY</p> <p>Category on Enlistment</p> <p>Category Recommended by Medical Board</p> <p>Present 23 1 1 2 2 5</p> <p>Recommended 23 1 1 2 2 5</p> <p>Place..... CFB Clinton</p> <p>Date..... April 30 1969</p>	<p style="text-align: center;">ARMY</p> <p style="text-align: center;">Profile on Enlistment</p> <table border="1" style="width: 100%; text-align: center;"> <tr> <th>YOB</th> <th>P</th> <th>U</th> <th>L</th> <th>H</th> <th>E</th> <th>M</th> <th>S</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table> <p style="text-align: center;">Present Profile</p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table> <p style="text-align: center;">Recommended by Medical Board</p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	YOB	P	U	L	H	E	M	S																									<p style="text-align: center;">R.C.A.F.</p> <p style="text-align: center;">Profile on Enlistment</p> <table border="1" style="width: 100%; text-align: center;"> <tr> <th>Vision</th> <th>Colour Vision</th> <th>Hearing</th> <th>Hands</th> <th>Arms</th> <th>Legs</th> <th>Other Factors Present</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table> <p>Category</p> <p style="text-align: center;">Recommended by Medical Board</p> <table border="1" style="width: 100%; text-align: center;"> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table> <p>Category</p>	Vision	Colour Vision	Hearing	Hands	Arms	Legs	Other Factors Present														
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..... President
 BW Wilton MAJ Member
 Member

PART VIII
 Certified True Copy. Date May 30/69 Signature [Signature]

PART IX
 Approved By: Confirmed By:
 Date Date

PART X
 Re-Examined and Category (or Profile) Confirmed:
 Remarks
 Date Signature

PART XI
 Date of Release
 (To be filled in by unit/ship effecting release) Signature

MEDICAL BOARD PROCEEDINGS RAPPORT D'EXAMEN MÉDICAL

PART I
 PARTIE I

Station or Place / Base ou endroit : **CFB CLINTON INFIRMERY** Date : **29 Apr 69**

Reason for Medical Board Proceedings / Raison de l'examen médical : **RELEASE AUTHORITY CFHQ DPI/RP 4657 282030Z Apr 69**
Release QR&O 15.01.4(a)

Force : **CF(A)** Rank / Grade : **SGT** Service No. / Matricule : **429 488 018**

Surname / Nom : **KALICHUCK** Given Names / Prénoms : **ALEXANDER**

Ship, Unit (or Establishment) / Navire, unité (ou établissement) : **CFB CLINTON** Present Trade / Spécialité actuelle : **SUP TECH**

Date of Birth / Date de naissance : **3.11.23** Former Civilian Trade / Métier civil antérieur : **Farmer**

Profession or Occupation / Profession ou emploi :

Permanent Home Address / Adresse du domicile permanent : **RR# 4 Walton Ont.**

Record of all Service (Record Chronologically)
 État de services complet (consigner chronologiquement)

Force	Number / Matricule	Rank / Grade	DATE		Theatre of Operations / Théâtre d'opérations
			From - Du	To - A	
RCALR	H 77067 15113	PTE	May 43	Jan 46	France, Belgium, Germany, Holland
RCAF	429-488 D.I.S.	PTE	Jun 50	PRESENT Release	Canada

History of Service obtained from: Man's Statement / Antécédents militaires obtenus par les déclarations du militaire Service Documents / Documents militaires Both / Les deux

PART II - PRESENT DISEASES OR INJURIES (to be filled in by the President of the Board)
 PARTIE II - MALADIES OU BLESSURES ACTUELLES (à remplir par le président du bureau médical)

Present Diseases or Injuries (If multiple, list in order of importance) Maladies ou blessures actuelles (S'il y en a plusieurs, les indiquer par ordre d'importance)	International Code No. N° de Code	Place of Origin Lieu	Date of Origin Date
Non-Medical Release			

PART III - STATEMENT OF PRESENT COMPLAINTS (Individual's own words)

Have you any trouble resulting from any disease or injury. If so, state what it is, when it started, and what you think was the cause.

PARTIE III - EXPOSÉ DES PLAINTES (Par l'individu concerné)

Souffrez-vous de malaises résultant d'une maladie ou d'une blessure quelconque? Si oui, dites en quoi ils consistent, quand ils ont commencé et quelle en est la cause, selon vous.

Witness:

Mulligan maj.

Signature:

no
Kalichek Sgt

Previous to joining the service did you suffer from any disease or injury mentioned in the above answer? If so, give details and dates as to hospital and doctor.

Avant de faire partie des forces armées, avez-vous souffert des maladies ou blessures mentionnées dans la réponse ci-dessus? Si oui, donnez les détails et les dates d'hospitalisation et de soins médicaux.

Witness:

Mulligan maj.

Signature:

no
Kalichek Sgt

PART IV - HISTORY OF PRESENT DISABILITY

This section should contain a detailed history of the origin of all diseases and injuries described in Part III or otherwise discovered. Past history and family history, if relevant, is to be included.

PARTIE IV - ANTÉCÉDENTS DE L'INVALIDITÉ ACTUELLE

La présente section doit contenir un compte rendu détaillé de l'origine de toutes les maladies et blessures décrites dans la partie III ou découvertes d'une autre façon. Il faut inclure les antécédents personnels et familiaux, s'il y a lieu.

RCAF - M-10:

- ① Fractured nasal bones Feb 51 (encl 5)
- ② Psychopemetic anxiety reaction July 59 (encl 4)
- ③ acute alcoholism gastritis. 2 mos (encl 21)
- ④ Presently complaining of epigastric burning before meals and at night. Referred DVA to clinic.
- ⑤ To be admitted May 1970 for recession of external rectus O.V.

Mulligan maj.



PUBLIC HEALTH LABORATORY SERVICE

 DEPARTMENT OF HEALTH
 DIAGNOSTIC SERVICES - STANDARD TESTS FOR SYPHILIS

09029

 ONTARIO PATIENT #036 *Let A. Lieber*
 AGE 45 LAST NAME FIRST NAME MIDDLE NAME
 SEX M TREATED PREVIOUS RESULT
 CHECK: PRENATAL FOLLOW-UP VISA
 REMARKS RELEASE

DATE RECEIVED 14. APR. 1969 LAB NO.

TEST	V.D.R.L.	K.R.P.
RESULT		
NON-REACTIVE		
WEAKLY REACTIVE		
REACTIVE		
QUANTITATIVE 1:		
UNSATISFACTORY FOR TEST		

Remarks

DATE SAMPLE TAKEN

DR. Base SurgeonCFB Clinton ONTARIO*W. M. Wilson*
M.D.

LONDON

14. APR 1969

000841

DND 2009U
7530-21-562-731

DEPARTMENT OF NATIONAL DEFENCE
CANADIAN FORCES MEDICAL SERVICE
LABORATORY REPORT

HOSPITAL, LABORATORIES

NAME (use block letters)	SERVICE NO.	WARD OR SERVICE	LAB. REG. NO.
SGT. KALICHUK A.	018	OP	

COLOUR	L. AMBER	SPEC GRAVITY	1.024	TURBID CLEAR
ALBUMEN - QUALITATIVE	N.		QUANTITATIVE	
SUGAR - QUALITATIVE	N.		QUANTITATIVE	
MICROSCOPIC				

OTHER TESTS:

PH. 8

KETONES - MODERATE

DATE SENT

URINALYSIS

DATE REPORTED

000842

NAME 420-488-018 Sgt Kalichuk DATE 14 Apr 69
ADDRESS CFB Clinton AGE 45



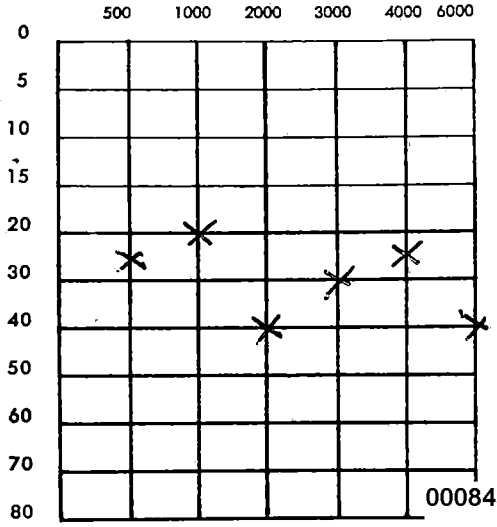
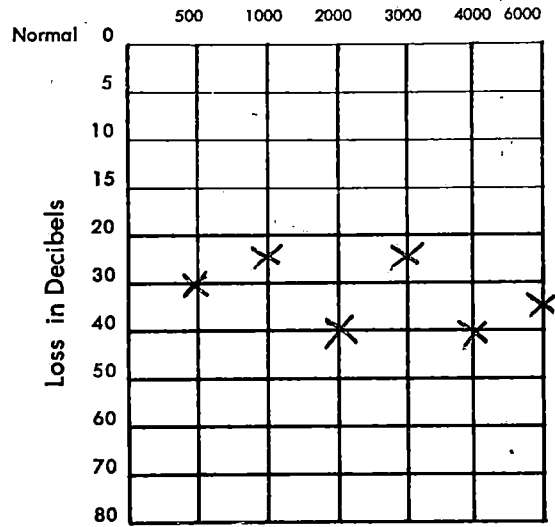
Otometer AUDIOGRAM

BY [Signature]

LEFT EAR

ISO

RIGHT EAR



000843

X-RAY REQUISITION AND REPORT

SURNAME <i>Kalichuk</i>		FIRST NAME AND INITIALS <i>Alexander</i>		SERVICE NO. <i>429-488-018</i>
RANK <i>Sgt</i>	SERVICE <i>CF (af)</i>	AGE <i>45</i>	PARENT UNIT <i>CFB CLINTON</i>	
X-RAY DEPARTMENT AT:			REPORT TO BE FORWARDED TO: (OFFICE)	

CLINICAL INFORMATION AND DIAGNOSIS:

Release medical

EXAMINATION REQUESTED:

Routine Chest

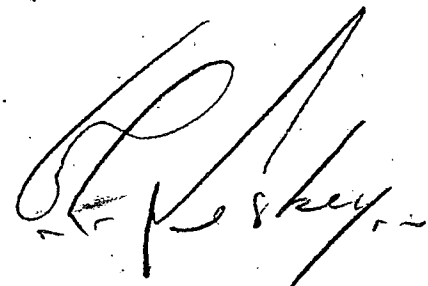
IF ROUTINE CHEST	TECHNICIANS USE ONLY		
ADMISSION _____ <input type="checkbox"/>	14 X 17 <input checked="" type="checkbox"/> (✓) 10 X 12 _____ 8 X 10 _____		
ENROLMENT _____ <input type="checkbox"/>			
RELEASE _____ <input checked="" type="checkbox"/> (X)			
ANNUAL _____ <input type="checkbox"/>			
SERVICE REQ. _____ <input type="checkbox"/>			
DATE	M.O.'S SIGNATURE <i>BW WILTON</i>	FILM NO. <i>8510</i>	DATE OF EXAMINATION <i>14 APR 69</i>

P.A. Chest.

No change from a film of Nov 22/68. Lung fields do not suggest any active lung disease.

Some lobulation of the right dome of the diaphragm. A few small calcified densities in the hilar regions. Pleural spaces are clear.

Heart chest ratio is 13.2/32.4.



Wm. L. Teskey, M.D. C.R.C.P. (C)
RADIOLOGIST

im 15.4.69

COPY 2

000844

PART V

PHYSICAL EXAMINATION - Before completing this section, the subject of the survey will be stripped and given a complete physical examination. All defects must be recorded and if indicated specialist's opinion obtained and attached hereto.

Height: Ft. 5 2 Ins. 5 1/2 Weight 155 lbs. Weight on enlistment 141 lbs.

EXAMINATION	NEG	POSITIVE FINDINGS AND REMARKS
Vision: s Glasses R <u>20 20</u> L <u>20 20</u>	<input checked="" type="checkbox"/>	
c Glasses R / L /		
c + 2.50 R / L /		
c + 1.50 R / L /		
Colour Vision: Plates	<u>C.V.N</u>	
Lantern		
Hearing: WV-R L	<u>42</u>	<u>by audiogram</u>
CV-R L		
Ears: Tym. Mem. R L	<input checked="" type="checkbox"/>	
Nose	<input checked="" type="checkbox"/>	
Mouth and Teeth	<input checked="" type="checkbox"/>	
Throat	<input checked="" type="checkbox"/>	
Head and Neck	<input checked="" type="checkbox"/>	<u>fluid accumulation</u>
Spine	<input checked="" type="checkbox"/>	
Extremities Upper	<input checked="" type="checkbox"/>	
Lower	<input checked="" type="checkbox"/>	
Hernia	<input checked="" type="checkbox"/>	
Genitalia	<input checked="" type="checkbox"/>	
Anus and Haemorrhoids	<input checked="" type="checkbox"/>	
Varicosities	<input checked="" type="checkbox"/>	
Abdomen	<input checked="" type="checkbox"/>	<u>liver 4 fb below xcm.</u>
Joints	<input checked="" type="checkbox"/>	<u>tenderness in epigastrium</u>
Chest: Min. <u>35</u> Max. <u>37</u>	<input checked="" type="checkbox"/>	
Lungs	<input checked="" type="checkbox"/>	
Heart	<input checked="" type="checkbox"/>	
Blood Pressure: S <u>150</u> D <u>90</u>	<input checked="" type="checkbox"/>	
Pulse Rate <u>100</u>	<input checked="" type="checkbox"/>	
Lymphatic Glands	<input checked="" type="checkbox"/>	
Ductless Glands	<input checked="" type="checkbox"/>	
Skin	<input checked="" type="checkbox"/>	
Tremors	<input checked="" type="checkbox"/>	
Pupils: L and A	<input checked="" type="checkbox"/>	
Reflexes	<input checked="" type="checkbox"/>	
CNS Including Emotional Status	<input checked="" type="checkbox"/>	

Chest X-ray No. 8510 Report normal

Serological Test No. 036 Type VDRL Report negative

Urinalysis: Sugar neg Albumin neg Microscopic neg

Other Laboratory or X-ray Reports (specify) ECS April 4 - normal

Summary of Positive Findings:

- ① Enlarged liver.
- ② Tenderness in epigastrium.
- ③ Exotropia o.v.

YOB	V	CV	H	G	D	A
23	1	1	2	2	2	5

Grade or Category

Considered by Examining MO

April 20 1969
(Date)

(DATE)

Milton M.J.
(Signature of MO Bringing Board Forward)

PART VI - RECOMMENDATION OF MEDICAL BOARD (Treatment required and disposal)

If treatment required specify nature and probable duration.

Fit for non medical release

Milton M.J.

PART VII

NAVY

ARMY

R.C.A.F.

Profile on Enlistment

Profile on Enlistment

Category on Enlistment

YOB	P	U	L	H	E	M	S

Vision	Colour Vision	Hearing	Hands	Arms	Legs	Other Factors Present

Present Profile

--	--	--	--	--	--	--	--

Recommended by Medical Board

Category Recommended by Medical Board

Recommended by Medical Board

--	--	--	--	--	--	--	--

--	--	--	--	--	--	--

YOB	V	CV	H	G	D	A	
Present	24	1	1	2	2	2	5
Recommended Place	23	1	1	2	2	2	5

Present
Recommended Place
CF 13 Clinton

..... President
Milton M.J. Member
..... Member

Date *April 20 1969*

PART VIII

Certified True Copy. Date

Signature

PART IX

Approved By:

Confirmed By:

Date

Date

PART X

Re-Examined and Category (or Profile) Confirmed:

Remarks

Date

Signature

PART XI

Date of Release

(To be filled in by unit/ship effecting release)

Signature

Lu
Salintors

ELECTROCARDIOGRAM TRACING

WARD: OPC RECORD NUMBER: ? ? ? ? DATE: 14 April, 1969.
 NAME: KALICHUK, A. 429-488-018 15113 DOCTOR: D.N.D.

The rate is 88. The rhythm is sinus, P-R interval .16 seconds.
 The voltage tends to be low. The tracing is not outside the
 limits of normal and unchanged from November, 1968.

JAL:kb.

J. A. Lewis, M.D.

14 Apr 69

PATIENT SGT KALICHUK H. SERIAL NO. 429-488-000 DATE 14 APR 69
 AGE 45 SEX M CASE NO. _____ DOCTOR BASE SURG.

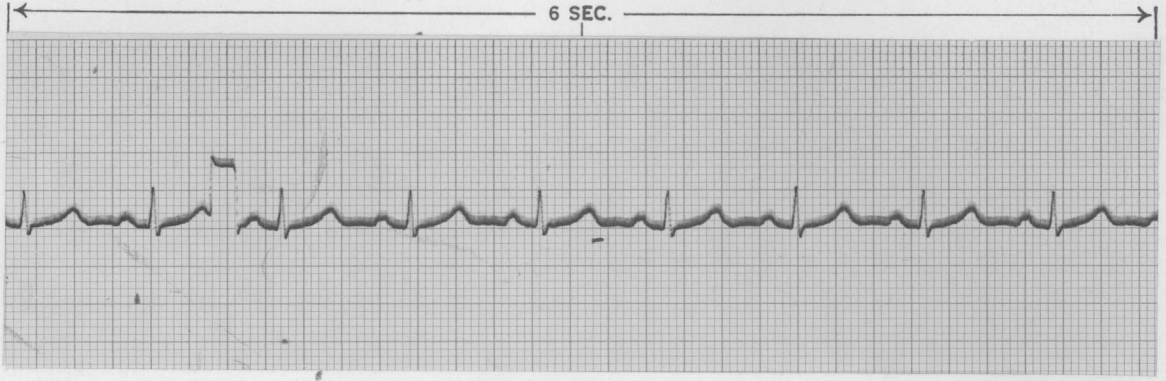
(Passible)

CFB CRINTON 6 SEC.

LEAD 1



LEAD 2



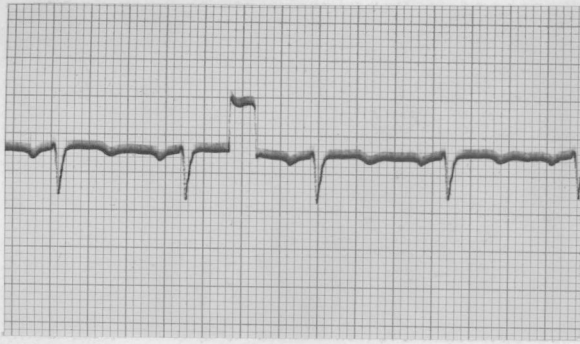
LEAD 3



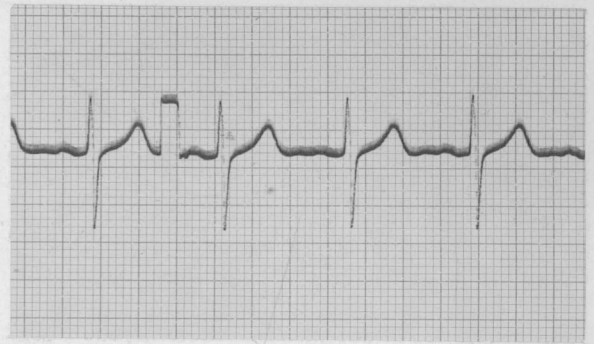
AURICULAR RATE _____ P-R INTERVAL _____ PATIENT POSITION _____
 VENTRICULAR RATE _____ Q-R-S INTERVAL _____ ELECTRICAL AXIS _____
 RHYTHM _____ S-T SEGMENT _____

REMARKS

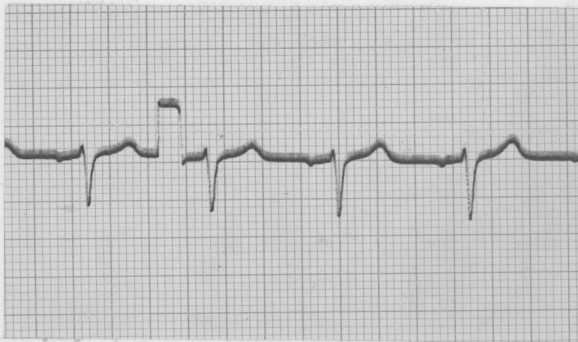
LEAD
CF₁
CR₁
CL₁
V₁



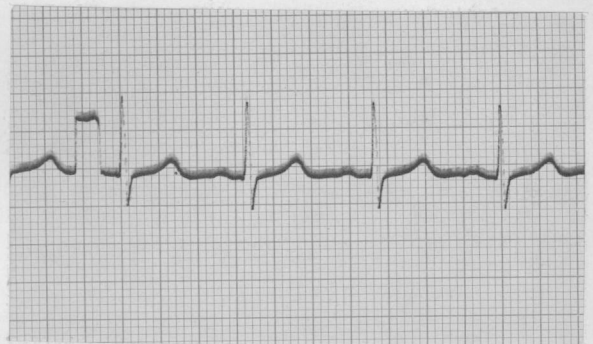
LEAD
CF₄
CR₄
CL₄
V₄



LEAD
CF₂
CR₂
CL₂
V₂



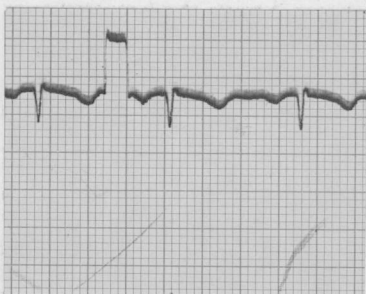
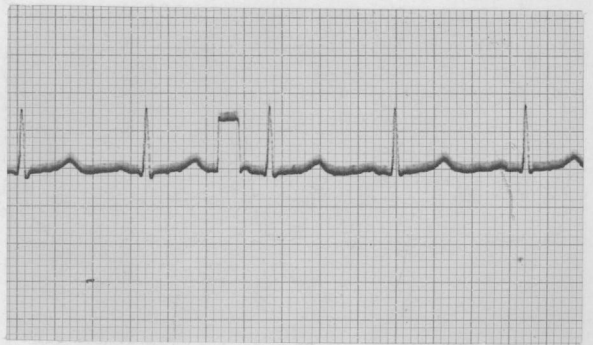
LEAD
CF₅
CR₅
CL₅
V₅



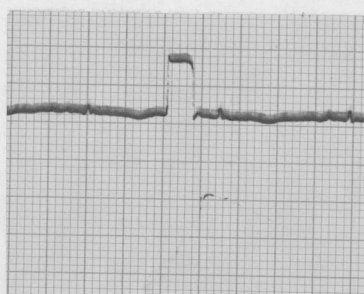
LEAD
CF₃
CR₃
CL₃
V₃



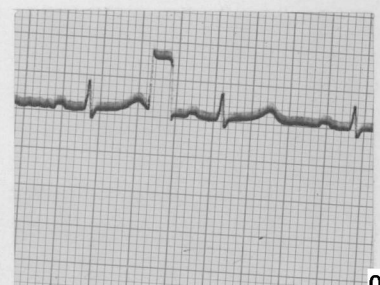
LEAD
CF₆
CR₆
CL₆
V₆



LEAD VR AVR



LEAD VL AVL



LEAD VF AVF

mm

(10-4-69)
Sec 18

TREATMENT SERVICES

CASE SHEET

OPHTHALMOLOGY

17 * 3 69

KALICHUK, ALEX 9657
15113
SURNAME, GIVEN NAMES RC 03NOV23
CFB CLINTON
SERVICE NO. (OR MARK)

RECORD NO.

DATE OF BIRTH

429-488-018

429-488-018 SGT(AF) KALICHUK Alexander CFB Clinton

Referred to eye clinic BY BW Wilton Major

Reason for Examination

History: Was seen by you in June for muscle imbalance. Feels it is getting worse.
Also feels glasses not strong enough.

Patient seen in clinic today, and would like stronger glasses for reading.

Anterior Segment } Rt. normal. Lt. normal.

Eye	VISION		REFRACTION			ADD	Vision After
	Before	U + 2.50	Sphere	Cylinder	Axis	Prism	
Rt.	20/20		+0.50			+2.50	20/20
Lt.	20/20		+0.75			+2.50	20/20

Glasses: Prescribed: { Rt. Sph. ^{+3.00} Cyl. Axis READING
Lt. Sph. ^{+3.25} Cyl. Axis READING

Pupils
Tension: Rt. Lt.
Cover Test: 20 Ft. 15 Ins.
Maddox Rod: 20 Ft. Exotropia 35 P. D. for distance. 15 Ins. 25 P. D. for near.
Cardinal Positions:

Convergence Cms. Accommodation { Rt. Cms.
..... Cms. Lt. Cms.

Fundi and Media } Rt. Lt. clear and normal, OU.

Fields:

Colour Vision

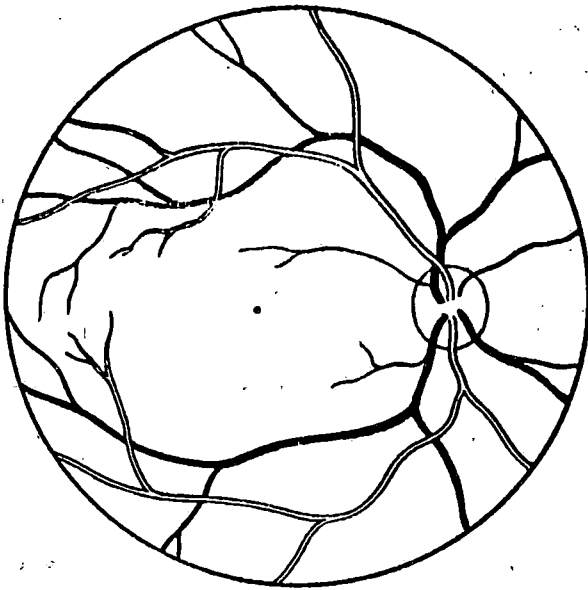
DIAGNOSIS 1. Exotropia, OU.
2. Hyperopia, OU.

Remarks and/or Treatment:
GLASSES AS ABOVE FOR READING. Patient would like to have stronger glasses, and would also like to have his muscle imbalance corrected. Arrangements have been made for this. ADMIT MAY 12th for recession of the external rectus of each eye to be done MAY 13th.

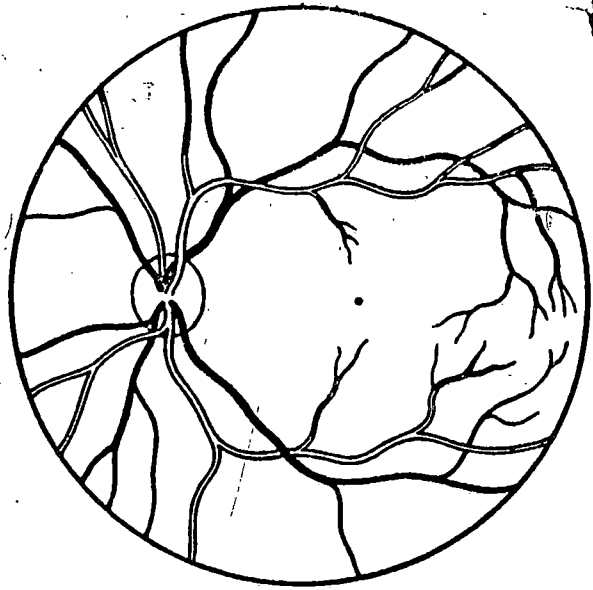
Date 10 April 69 Ophthalmologist C. A. Thompson, M.D.

FUNDI

Right Eye

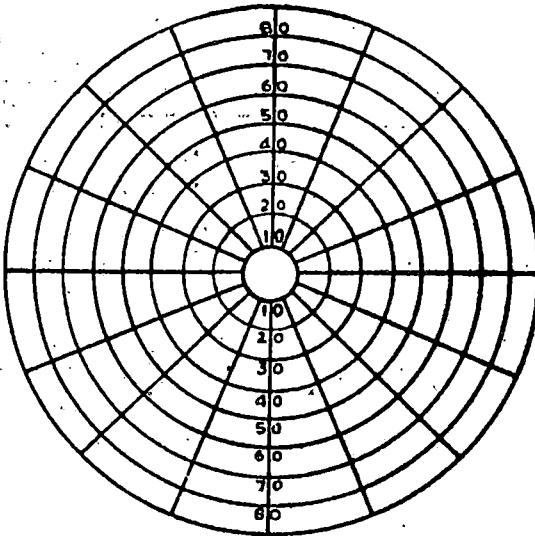


Left Eye



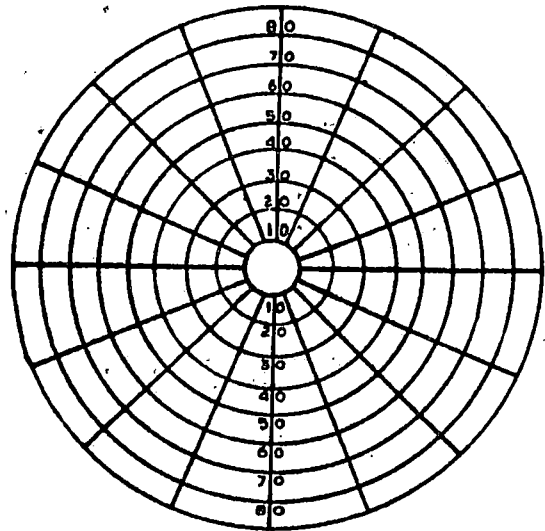
FIELD STUDY

Left Eye



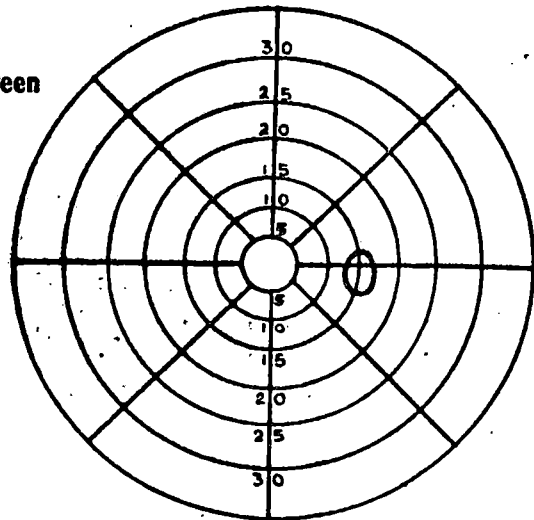
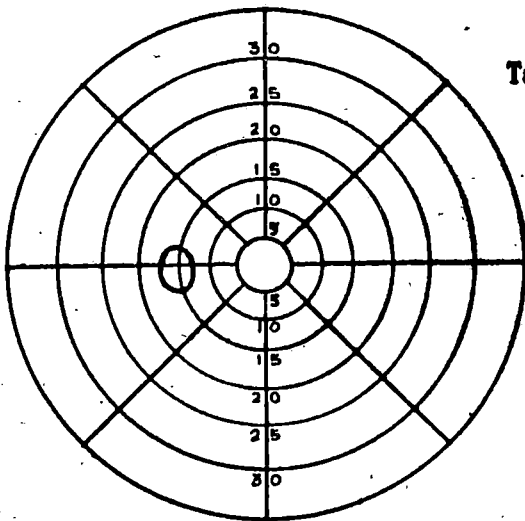
Perimeter

Right Eye



Colour
Test object, Size
Distance

Tangent Screen



Colour
Test object, Size
Distance

RECORD OF MEDICAL EXAMINATION
(Other than on Enrolment, Release, Annual Flying)

Enclosure Number in
Medical Envelope

50

Purpose of Examination Annual over 40	Examination Unit CFB Clinton
--	---------------------------------

PART I - SERVICE PARTICULARS

Name KALICHUK Alexander	Rank Sgt(AF)	Number 429-488-018
Establishment CFB Clinton	Trade Sup Tech 911	
Date of Enrolment 24 Jan 50	Date of Birth 3 Nov 23	Service CAF(AF)

PART II - HISTORY AND/OR FINDINGS PERTINENT TO EXAMINATION
(consultant's reports to be attached/referred to where indicated)

RCAF M10

No problem during the last year. Tenderness (L) chest, shoulder when lying on side at night.

Nil of significance on examination.

Diagnosis:

FIT

PART III - MEDICAL OFFICER'S RECOMMENDATIONS (State specific limitations)

FIT FULL DUTY

Date for next examination/Board NOV 69

PART IV

CATEGORY OR PROFILE	RCN		ARMY							RCAF							CATEGORY	
	Cat	Visual Stand	YOB	P	U	L	H	E	M	S	VISION	COLOUR VISION	HEAR-ING	HANDS	ARMS	LEGS		OTHER FACTORS PRESENT
PRESENT											YOB	V	CV	H	G	O	A	
RECOMMENDED											23	1	1	2	2	2	5	
											YOB	V	CV	H	G	O	A	
											23	1	1	2	2	2	5	

Date 29 Jan 69

BW WILTON MAJOR

Signature Examining Medical Officer

Remarks Approving Medical Officer

I CONCUR

Date Feb 2 1969

BW WILTON MAJOR

Signature and Appointment Approving Medical Officer

000852

LABORATORY
REQUISITION

BIOCHEMISTRY

SERVICE RCAF

BIOCHEWIZKA

INSTITUTION

WARD

Base Surgeon
CFB Clinton

46

SURNAME, GIVEN NAMES

KALICHUK

RECORD NO.

SERVICE NO. (OR RANK)

Sgt 018

DATE OF BIRTH

SPECIMEN:

Blood

CLINICAL NOTE OR DIAGNOSIS:

EXAMINATION REQUESTED:

serum cholesterol

Blood	Glucose, AC	mg %	PC	mg %	Creatinine	mg %
	B.U.N./N.P.N.	mg %	CO ₂ Comb. P.	mEq		
Serum	Sodium	mEq	Potassium	mEq	Chloride	mEq
	Calcium	mg %	Bilirubin	mg %	Bil. Direct	mg %
	Proteins	g %	Albumin	g %	Globulins	g %
	Phosphate	mg %	Phosph'ase, Alk.	U.	Phosph'ase, Acid	U.
	Ceph. Chol. Fl.		Thymol Turb	U.	Thymol Fl.	
	B.S.P. Ret'n	%	Cholesterol 280	mg %	Uric Acid	mg %
	Amylase	U.	Transaminase	U.		
C.S.F.	Glucose	mg %	Chlorides	mg %	Proteins	g%

OTHER TESTS:

Date Received

BIOCHEMISTRY

Date

000855

**LABORATORY
REQUISITION**

BIOCHEMISTRY

SERVICE

BIOCHEMISTRY

INSTITUTION

BASE SURGEON

CFB CLINTON

OP

JAN/69

47 *mm*

SURNAME, GIVEN NAMES

SGT. KALICHUK A.

RECORD NO.

SERVICE NO. (OR RANK)

018

DATE OF BIRTH

SPECIMEN: BLOOD

CLINICAL NOTE OR DIAGNOSIS:

EXAMINATION REQUESTED: SERUM CHOLESTEROL

Blood	Glucose, AC	mg %	PC	mg %	Creatinine	mg %
	B.U.N./N.P.N.	mg %	CO ₂ Comb. P.	mEq		
Serum	Sodium	mEq	Potassium	mEq	Chloride	mEq
	Calcium	mg %	Bilirubin	mg %	Bil. Direct	mg %
	Proteins	g %	Albumin	g %	Globulins	g %
	Phosphate	mg %	Phosph'ase, Alk.	U.	Phosph'ase, Acid	U.
	Ceph. Chol. Fl.		Thymol Turb	U.	Thymol Fl.	
	B.S.P. Ret'n	%	Cholesterol 245	mg %	Uric Acid	mg %
	Amylase	U.	Transaminase	U.		
C.S.F.	Glucose	mg %	Chlorides	mg %	Proteins	g%

OTHER TESTS:

Date Received

BIOCHEMISTRY

000857

Date

PUBLIC HEALTH LABORATORY SERVICE
 DEPARTMENT OF HEALTH
 SERODIAGNOSIS - STANDARD TESTS FOR SYPHILIS



ONTARIO

 PATIENT 377 Legt Kabebe
 LAST NAME FIRST NAME MIDDLE NAME
AGE 44
 SEX M PREVIOUS TREATED FOR PRENATAL PURPOSES REGARD

 CHECK: PRENATAL FOLLOW UP VISA

 REMARKS AS Blood Group Please For records only

Rh Negative
 (SCREEN TEST WITH ANTI-D)

DATE SAMPLE TAKEN

DR. Base SurgeonCFB Clinton_____
ONTARIOTELEPHONE INQUIRY REGARDING REPORTS NOT PERMITTED *da*

31403

49

DATE RECEIVED LAB NO.

RESULT

TEST

V.D.R.L.

K.R.P.

NON-REACTIVE

WEAKLY REACTIVE

REACTIVE

QUANTITATIVE 1:

UNSATISFACTORY FOR TEST

Remarks

*ABO blood grouping
 at St. Michael's Lab
 M.D.
 LONDON*

000858

26 NOV 1968

DND 2009U
7530-21-562-7314

DEPARTMENT OF NATIONAL DEFENCE.
CANADIAN FORCES MEDICAL SERVICE

LABORATORY REPORT

..... HOSPITAL, LABORATORIES

NAME (use block letters)	SERVICE NO.	WARD OR SERVICE	LAB. REG. NO.
KALICHUK	Sgt		

COLOUR yellow SPEC GRAVITY 1.020 TURBID OR CLEAR
ALBUMEN - QUALITATIVE a QUANTITATIVE
SUGAR - QUALITATIVE r QUANTITATIVE
MICROSCOPIC

OTHER TESTS:

PH 6.8

DATE SENT

URINALYSIS

DATE REPORTED

000859

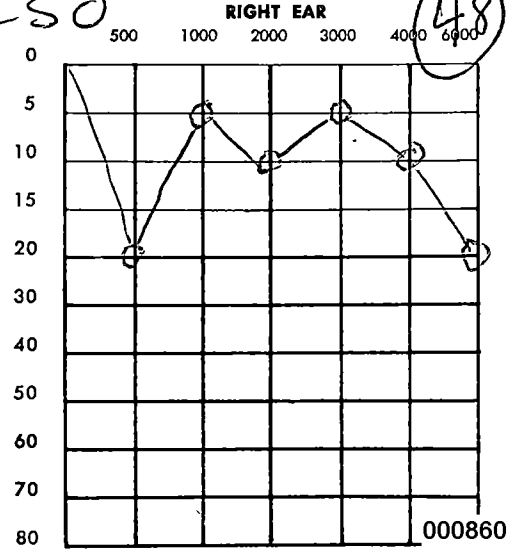
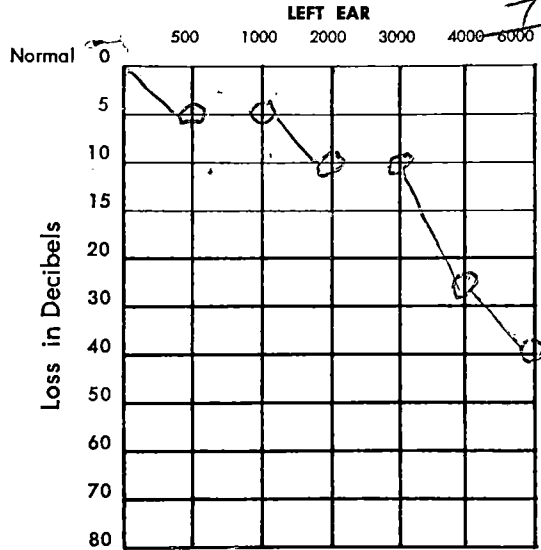
NAME 429-488-01 Sgt (AF) Kalichuk A DATE 21 Nov 68
ADDRESS CFB Clinton AGE 45

BY R. Ste

Ambco **Otometer** **AUDIOGRAM**

ISO

48



000860

X-RAY REQUISITION AND REPORT

Mill
45

SURNAME KALICHUK		FIRST NAME AND INITIALS Alexander	SERVICE NO. 429-488-018
RANK Sgt	SERVICE CAF(AF)	AGE 45	PARENT UNIT CFB Clinton
X-RAY DEPARTMENT AT: CFB Clinton		REPORT TO BE FORWARDED TO: (OFFICE)	

CLINICAL INFORMATION AND DIAGNOSIS:

Annual over 40

EXAMINATION REQUESTED:

PA Chest

IF ROUTINE CHEST	TECHNICIANS USE ONLY
ADMISSION <input type="checkbox"/>	
ENROLMENT <input type="checkbox"/>	14 X 17 - 1
RELEASE <input type="checkbox"/>	
ANNUAL <input checked="" type="checkbox"/>	10 X 12
SERVICE REQ. <input type="checkbox"/>	8 X 10

DATE 21 Nov 68	M.O.'S SIGNATURE BW Wilton Major
--------------------------	--

FILM NO. 8257	DATE OF EXAMINATION 21 Nov 68
-------------------------	---

P.A. FILM OF THE CHEST.

No active lung disease. Pleural spaces are clear.

Heart and aorta appear normal.

W.L. Teskey

Wm.L. Teskey, M.D. C.R.C.P. (C)
RADIOLOGIST

im 26.11.68

44

ELECTROCARDIOGRAM TRACING.

CFB CLINTON

WARD: OPC RECORD NUMBER: ???? DATE: 22 November, 1968.
NAME: KALICHUK, A. 15113 429-488-018 DOCTOR: D.N.D.

The rate is 92. The rhythm is sinus.
Again this tracing shows T-1 smaller than T-3 but
this is unchanged and may be a postional phenomenon.

JAL:kb.

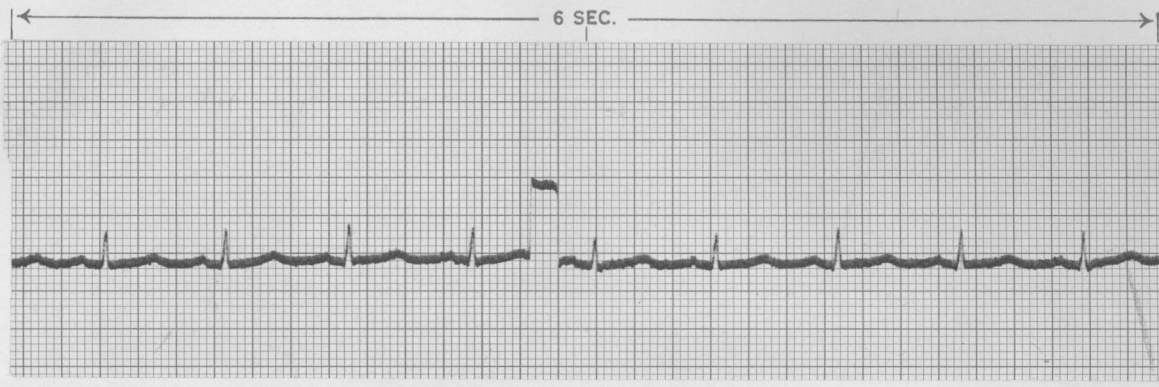
J. A. Lewis, M. D.

22 Nov 68.

PATIENT Sgt KALICHUN-A SERIAL NO 429-488-01 DATE 22 Nov 68
AGE 45 SEX M CASE NO. _____ DOCTOR _____

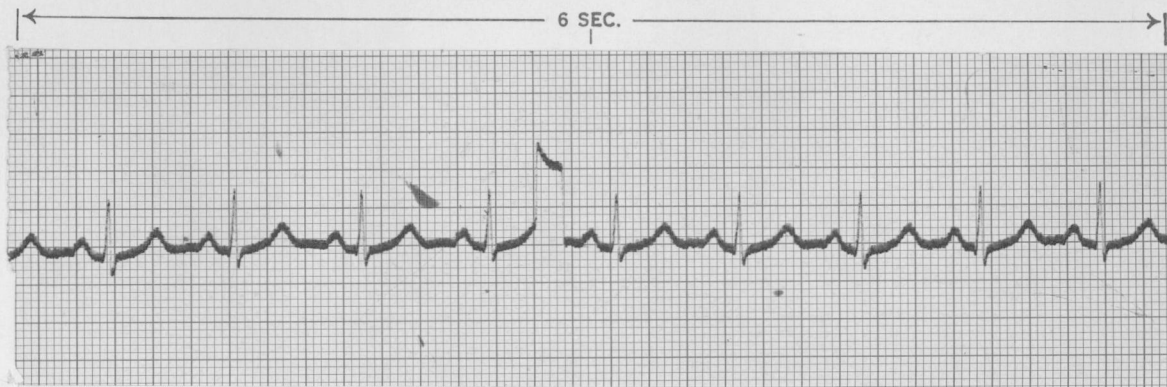
15113

LEAD 1

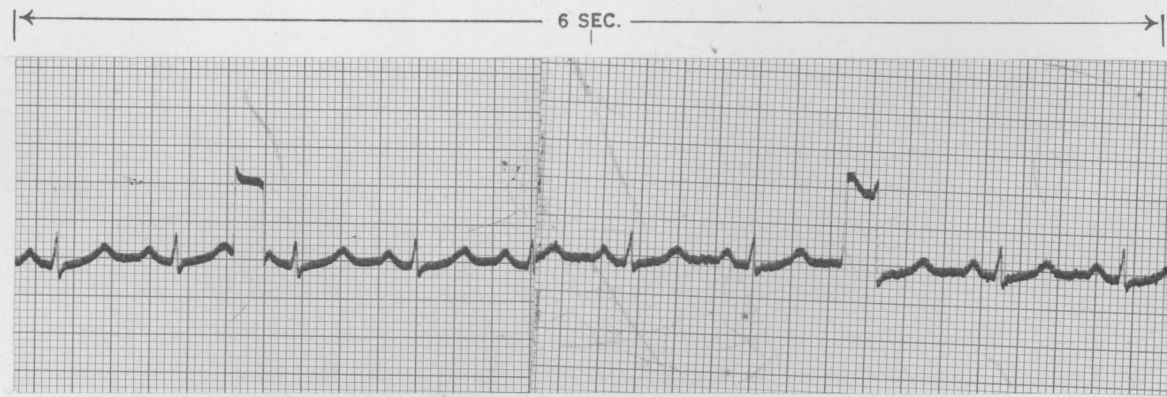


FASTING - B/P 128/90 14-5-5 - W-150

LEAD 2



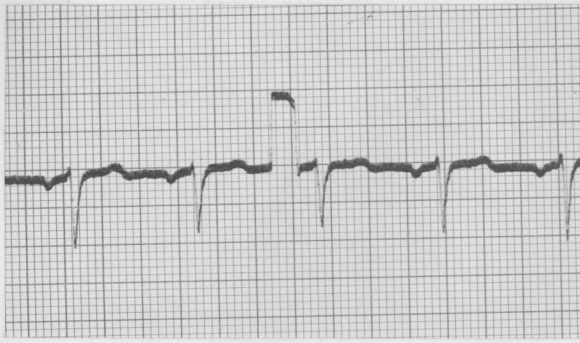
LEAD 3



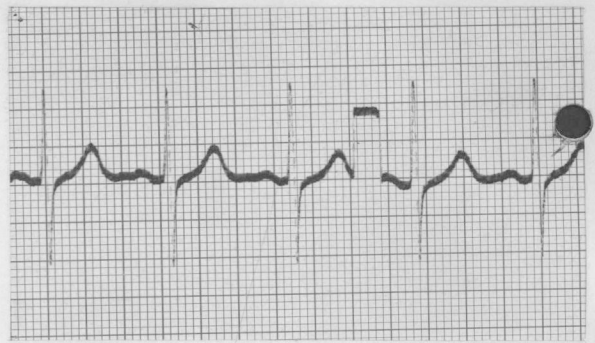
AURICULAR RATE _____ P-R INTERVAL _____ PATIENT POSITION _____
VENTRICULAR RATE _____ Q-R-S INTERVAL _____ ELECTRICAL AXIS _____
RHYTHM _____ S-T SEGMENT _____

REMARKS

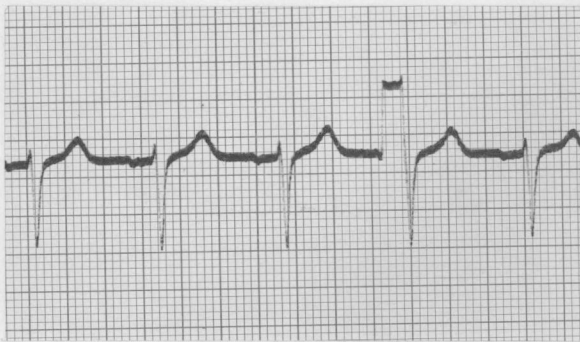
LEAD
CF₁
CR₁
CL₁
V₁



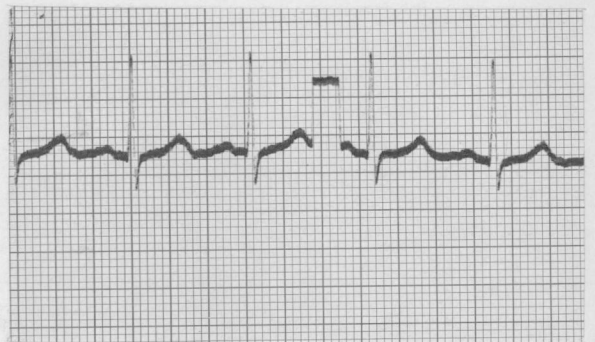
LEAD
CF₄
CR₄
CL₄
V₄



LEAD
CF₂
CR₂
CL₂
V₂



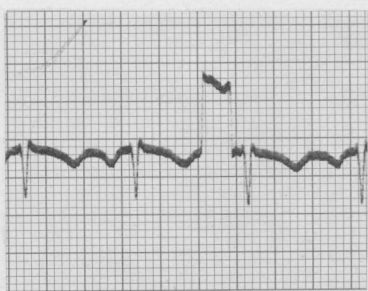
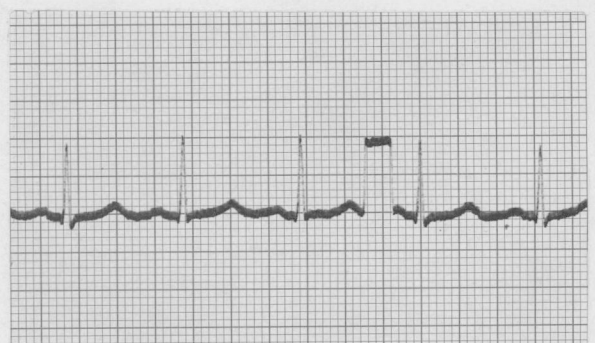
LEAD
CF₅
CR₅
CL₅
V₅



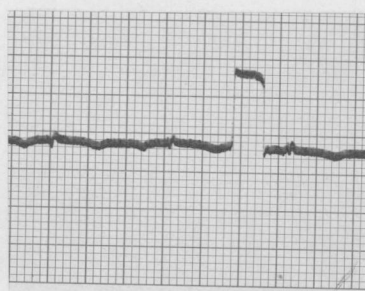
LEAD
CF₃
CR₃
CL₃
V₃



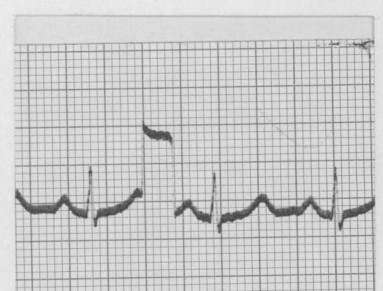
LEAD
CF₆
CR₆
CL₆
V₆



LEAD VR AVR



LEAD VL AVL



LEAD VF AVF

000864

X-RAY REQUISITION AND REPORT

mmw

SURNAME		FIRST NAME AND INITIALS		SERVICE NO.
KARICHUK		ALEX		425-418
RANK	SERVICE	AGE	PARENT UNIT	
Lt. Col.	RCM	45	CFS CLINTON	
XRAY DEPARTMENT AT:			REPORT TO BE FORWARDED TO: (OFFICE)	

CLINICAL INFORMATION AND DIAGNOSIS:

*Productive cough,
fever, chills last few
days.*

EXAMINATION REQUESTED:

PA & lat chest

IF ROUTINE CHEST	TECHNICIANS USE ONLY
ADMISSION <input type="checkbox"/>	14 X 17 - 2
ENROLMENT <input type="checkbox"/>	
RELEASE <input type="checkbox"/>	
ANNUAL <input type="checkbox"/>	
SERVICE REQ. <input type="checkbox"/>	10 X 12
	8 X 10

DATE	M.O.'S SIGNATURE
<i>Nov 12 1968</i>	<i>William L. Teskey MD</i>

FILM NO.	DATE OF EXAMINATION
<i>8229</i>	<i>12 Nov 68</i>

P.A. & LATERAL VIEWS OF THE CHEST.

Compared with previous films of December 7/67 and October 6/66, no change in the general appearance of the lung fields. No definite evidence of pulmonary infiltration. The pleural spaces are clear. There appears to be a small pericardial fat pad at the left cardio-phrenic angle.

The heart chest ratio 12.5/32.5.

W. L. Teskey

gb 15-11-68

Wm. L. Teskey, M.D., C.R.C.P. (C)
RADIOLOGIST

000865

American Optical Company Canada Limited

ARRIVAL DATE June 28-68	TRAY NO. 9
PATIENT 429-488-018 SGT 115113 Kalichuk, Alex	SEND TO C. FB CLINTON, RURAL PARK, ONT.
STREET C. FB CLINTON	PATIENT
CITY	CUSTOMER

BILLING DATE JUL 2 1968	BRANCH NUMBER 53
INVOICE NUMBER 001152	
LENSES	3 25
COLOR	
CASE	25
HARDENING	
FRAME-MTG.	1 75
REPAIR	
ARCOTE-ULTRACOTE	
MISCELLANEOUS	
SUB-TOTAL	5 25
SALES TAX	
POSTAGE	
TOTAL	5 25
ENCLOSED	LENS
TO COME	FRAME
A O SUPPLY	

UNCUT	SPH.	CYL.	AXIS	PRISM	BASE	IN	DEC.	OUT	CIRCLE DESIRED LENS STYLE	
									SINGLE VISION	TILLYER BIFOCALS
DIST R	+1.75								Tillyer Masterpiece	Executive
L	+1.75								Tillyer Aolite	Sovereign 22-25
ADD FOR READ R									Tillyer	Tillyer S 22-25-28
L									CATARACT	Tillyer D 22
		SEG. HT.	SEG. WIDTH	SEG. INSET	TOTAL INSET				Aolite Aspheric	Tillyer A-B
				R	MM	R	MM		Lenticular E	Tillyer Aolite
				L	MM	L	MM		Aphakic	S22 D22
									TINT	Executive
									White	KRYPTOK
									Cruxite A-AX-B-C	TILLYER TRIFOCALS
									Calobar B-C-D	Executive
									Cosmetan	Sovereign 724
									Truecolor	Tillyer S 622
									Ultracote ...	Tillyer S 724
									Grey-Green-Brown	DOUBLE SEG.
									Tempress	Executive
									Super Armorplate	Sovereign-Tillyer D
									Arcote	Kryptok-Kryptok

FRAME NAME OR CAT. NO. 2900 mak	BRIDGE SIZE 26	TEMPLE LENGTH 6
LENS SIZE 46	LENS SHAPE	DIST. P.D. 68
NEAR	FRAME COLOR	HOLES PER LENS 1 2

Reading glasses.

BOOKKEEPING COPY

000866

Materials

Rx Classification

- OPHTHALMIC
- SUPER ARMORPLATE

Production
Classification

NO. SPHS. _____

NO. CYLS. _____

NO. EDGES _____

INSERTS 1/2 1

MTGS. 1/2 1

REPAIRS 1/2 1

Rx Arrival Date

Clerk No.

Sales' Area

Delivery Classification

- MESSENGER
- OTHER
- OFFICE

000867

DEPARTMENT OF NATIONAL DEFENCE
REQUISITION ON A CONTRACT

43

NO. <i>106</i>	ON	*DDP/OP CONTRACT NO FE065702/200-57-02-570 LON7-3534/1
-------------------	----	--

SERVICE

TO
American Optical Co Canada Ltd
184 King Street
London Ont

TO THE CONTRACTOR

YOU ARE REQUESTED TO SUPPLY THE FOLLOWING MATERIEL/SERVICES IN ACCORDANCE WITH THE TERMS OF THE ABOVE REFERENCED CONTRACT.
ONLY MATERIEL/SERVICES INCLUDED IN THE CONTRACT SHALL BE SUPPLIED AGAINST THIS REQUISITION.
EACH DELIVERY SHALL BE ACCOMPANIED BY A PACKING NOTE OR DELIVERY SLIP.
PLEASE ADVISE THE UNDERSIGNED IF THE DELIVERY DATE CANNOT BE MET.
INVOICES SHALL BE PREPARED IN ACCORDANCE WITH THE INSTRUCTIONS SET OUT IN THE CONTRACT.
for *(D.J. Gladman)* Major
Base Surgeon

DELIVER TO
Base Commander
CFB Clinton
Adastral Park, Ont

DELIVERY DATE Within 72 Hours

DATE FOR DEPARTMENT OF NATIONAL DEFENCE

CONTRACT ITEM NO	REP./STOCK NO	MATERIEL/SERVICES	QUANTITY	UNIT
------------------	---------------	-------------------	----------	------

429-488-018
Number

Sgt
Rank

Kalichuk A
Name & Initials

1. Please supply the above named with:

Spectacles as per accompanying prescription in suitable frames and cases, in accordance with DDP contract,

or

Such optical repairs or services as may be required to restore his present spectacles to a fully serviceable condition.

2. One copy of this form signed by the recipient of the spectacles or services performed is to accompany the invoices which you submit monthly under terms of the DDP contract.

3. Please note that personnel are permitted to obtain alternate nonflammable acetate frames of their choice by paying the differences in cost between the frames specified in the contract.

Received in good order:

Kalichuk
SIGNATURE

Sgt
RANK

9 July 68
DATE

TREATMENT SERVICES

KALICHUK, ALEX 9657
15113 RC 02NOV23
CFB CLINTON

RECORD NO.

DATE OF BIRTH

SURNAME, GIVEN NAME

SERVICE NO. (OR RANK)

429-488-018

SEC 1 B

CASE SHEET

OPHTHALMOLOGY

(15113) 429-488-018 Sgt KALICHUK A

CFB Clinton

Referred to eye clinic BY BW Wilton Capt.

Reason for Examination

History: Eyes ache after reading with present glasses. Also (L) esophoria.

Would like recheck of Rx please.

This man is complaining that his present glasses are not strong enough.

Anterior Segment } Rt. normal. Lt. normal.

Eye	VISION		REFRACTION			ADD	Vision After
	Before	<u>C + 2.50</u>	Sphere	Cylinder	Axis	<u>-Bates</u>	
Rt.			<u>+0.50</u>			<u>+1.25</u>	<u>20/20</u>
Lt.			<u>+0.50</u>			<u>+1.25</u>	<u>20/20</u>

Glasses: { Rt. Sph. +1.75 Cyl. Axis READING

Prescribed: { Lt. Sph. +1.75 Cyl. Axis READING

Pupils normal. Lt. normal.

Tension: Rt. normal. Lt. normal.

Cover Test: 20 Ft. Exotropia 35 P. D. 15 Ins.

Maddox Rod: 20 Ft. Exotropia 25 P. D. 15 Ins.

Cardinal Positions:

Convergence Cms. Accommodation { Rt. Cms.

..... Cms. { Lt. Cms.

Fundi and Media } Rt. clear and normal.

..... Lt.

Fields:

Colour Vision

DIAGNOSIS 1. Exotropia, OU.

2. Hyperopia, OU.

Remarks and/or Treatment: GLASSES FOR READING AS ABOVE. If he wishes some time to have muscle imbalance corrected, this could be arranged.

Date 27 June 68 /vc Ophthalmologist C. A. Thompson, M.D.

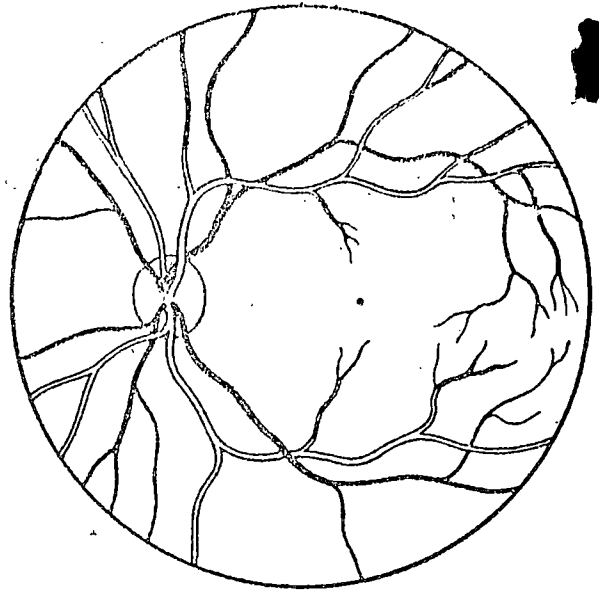
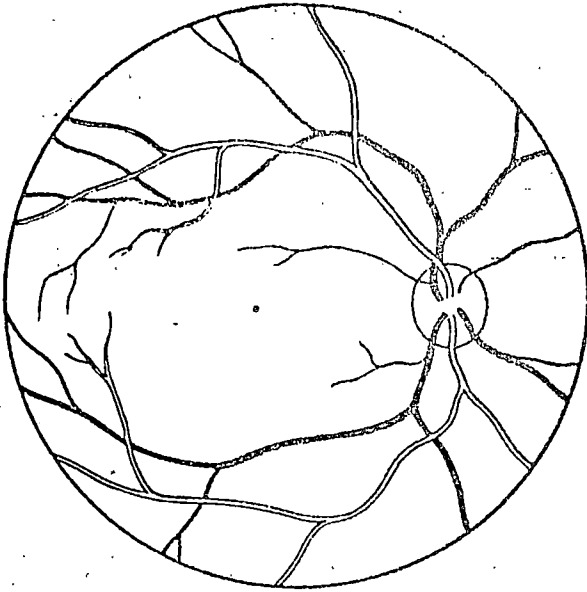
000869

101
1018

FUNDI

Right Eye

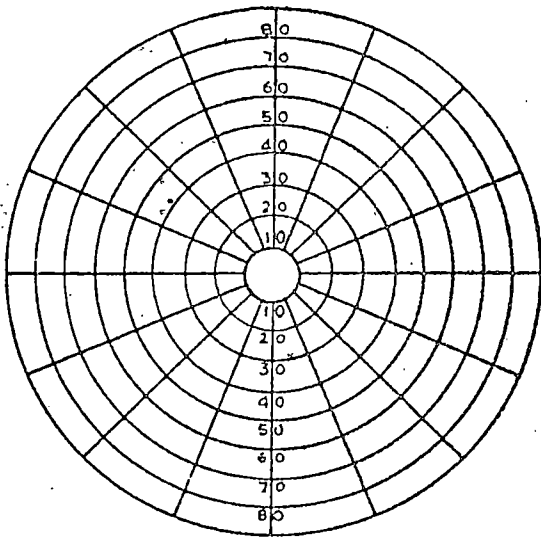
Left Eye



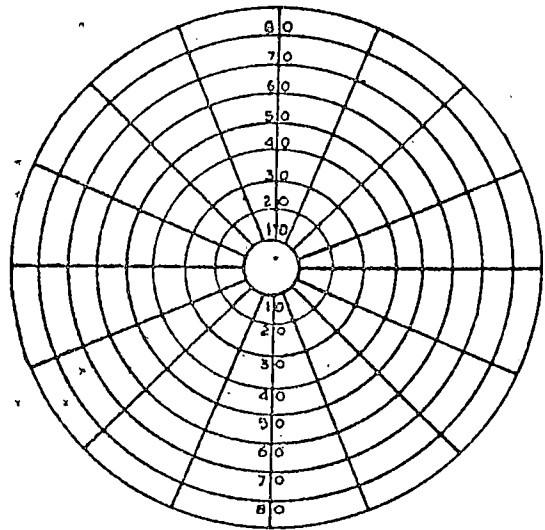
Left Eye

FIELD STUDY

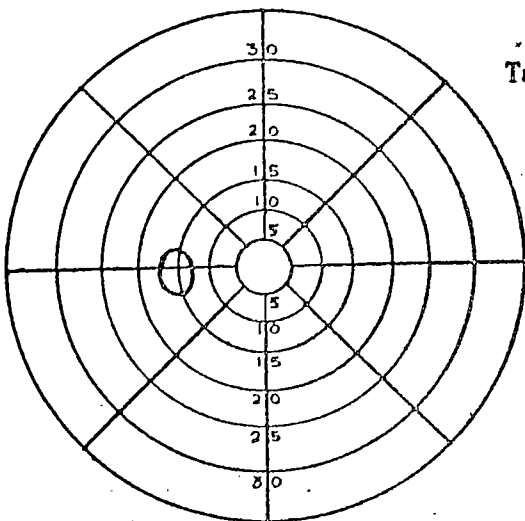
Right Eye



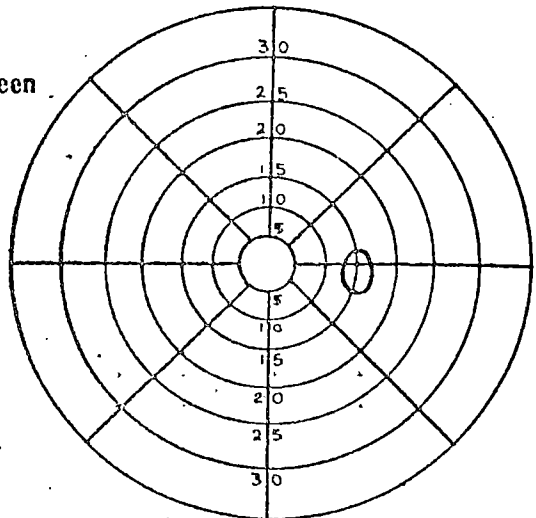
Perimeter



Colour
Test object, Size
Distance



Tangent Screen



Colour
Test object, Size
Distance

RECORD OF MEDICAL EXAMINATION
(Other than on Enrolment, Release, Annual Flying)

Enclosure Number in
Medical Envelope

40

Purpose of Examination: Annual over 40 & Conversion to GO factor
Examination Unit: CFB Clinton Ont

PART I - SERVICE PARTICULARS

Name: KALICHUK Alexander Rank: Sgt Number: 15113
Establishment: CFB Clinton Ont Trade: Sup Tech 911
Date of Enrolment: 24 Jan 50 Date of Birth: 3 Nov 23 Service: RCAF (Reg)

PART II - HISTORY AND/OR FINDINGS PERTINENT TO EXAMINATION
(consultant's reports to be attached/referred to where indicated)

No complaints at present except occasional chest pain when he gets a cold. This does not sound like angina from his description.
Recent ECG and chest x-ray normal.
Is slightly overweight.

Diagnosis: Slightly overweight

PART III - MEDICAL OFFICER'S RECOMMENDATIONS (State specific limitations)

H2 audiogram
G2 O2 for age.

Date for next examination/Board: Dec 1968

PART IV

CATEGORY OR PROFILE	RCN		ARMY							RCAF							CATEGORY	
	Cat	Visual Stand	YOB	P	U	L	H	E	M	S	VISION	COLOUR VISION	HEAR-ING	HANDS	ARMS	LEGS		OTHER FACTORS PRESENT
PRESENT											1	1	1	1	1	1	0	A4B
RECOMMENDED																		

YOB 23 V 1 CV 1 H 2 G 2 O 2 A 5

Date: 19 Dec 67

[Signature]
Signature Examining Medical Officer

Remarks Approving Medical Officer

I concur

Date: 19 Dec 67

[Signature]
Signature and Appointment Approving Medical 000871

PART V - PHYSICAL EXAMINATION

EXAMINATION		Consi- dered normal	See below	EXAMINATION		Consi- dered normal	See below
1	General appearance	N		15	Lungs	N	
2	Body Frame: Sm <u>N</u> Med <u> </u> Lg <u> </u>			16	Heart	N	
3	Height: ft. <u>5</u> ins. <u>5</u>			17	Breasts	N	
4	Weight (Stripped) <u>150</u> lbs.			18	Pulse Rate <u>80</u>		
5	Vision: s glasses R <u>20/15</u> L <u>20/15</u> c glasses R <u> </u> L <u> </u>			19	Blood Pressure: S <u>124</u> D <u>76</u>		
6	Colour Vision: Plates <u>CVN</u> Lantern <u> </u>			20	Abdomen		(1)
7	Pupils: Light <u> </u> Acc <u> </u>			21	Genitalia	N	
8	Visual Field <u> </u>			22	Hemial Orifices		
9	Fundl <u> </u>			23	Anus		
10	Hearing: WV R <u> </u> L <u>H2</u> CV R <u> </u> L <u>Audiogram</u>			24	Rectal Exam (digital)		
11	Ears & Tympani: R <u> </u> L <u> </u>			25	Skin		
12	Mouth & Teeth <u> </u>			26	Varicosities		
13	Nose & Throat <u> </u>			27	Lymphatic Glands		
14	Chest: Min. <u> </u> Max. <u> </u>			28	Thyroid		
				29	Extremities: Upper <u> </u> Lower <u> </u>		
				30	Spine		
				31	CNS		
				32	Emotional Status	N	
33	Chest X-Ray: Date <u> </u> Report <u> </u>						
34	Urinalysis: SG <u> </u> Alb <u>Trace</u> Sugar <u>Neg</u> Microscopic <u>4 - 8 WBC 2 - 6 RBC</u>						
35	Electrocardiogram: Date <u> </u> Report <u> </u>						
36	Other Lab Tests <u> </u> <u> </u> <u> </u> <u> </u>						

POSITIVE FINDINGS AND/OR REMARKS:

1) appendectomy scar.

D. J. GLADMAN MAJOR

ELECTROCARDIOGRAM TRACING

CFB CLINTON

WARD: OPC RECORD NUMBER: ? ? ? ? DATE: 7 December, 1967
NAME: KALICHUK, A. 15113 DOCTOR: D.N.D.

31

The rate is 94. The rhythm is sinus.
An essentially normal tracing, unchanged from
October, 1966.

JAL:kb.

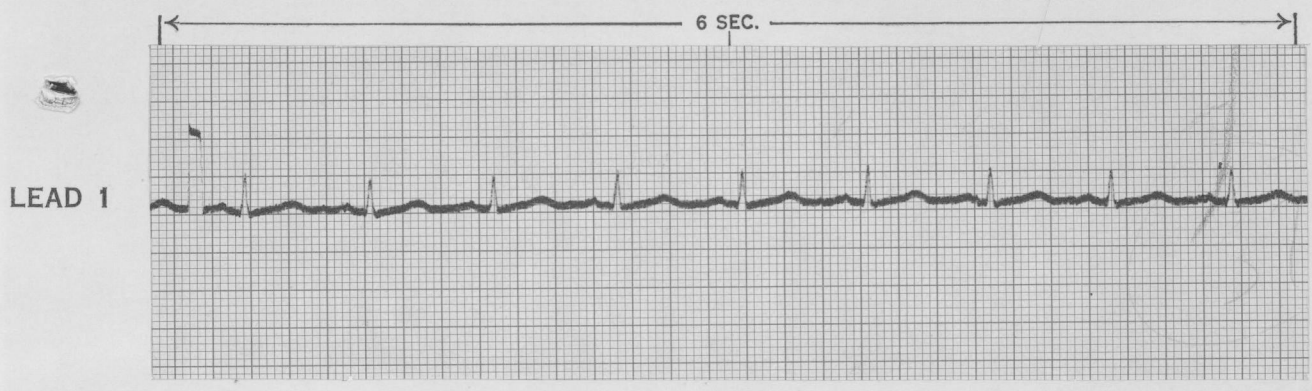
J. A. Lewis, M.D.

7 Dec 67.

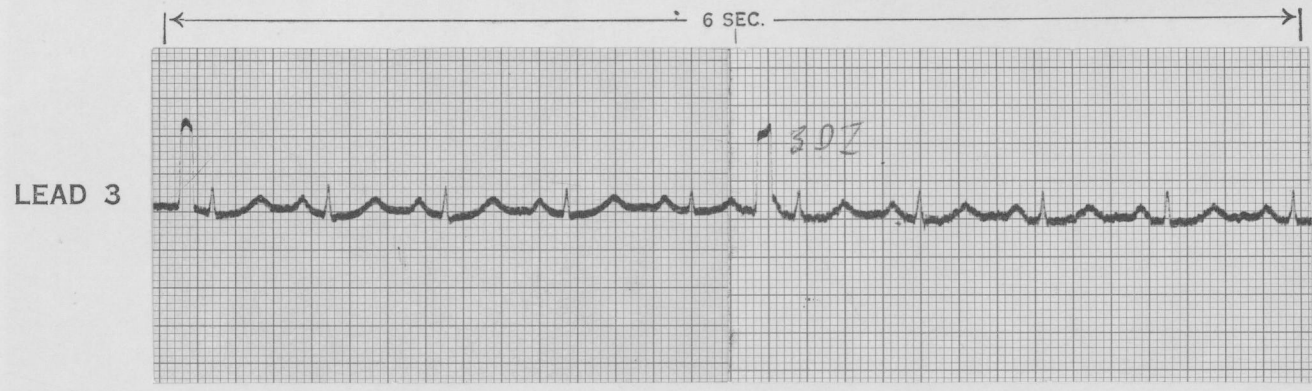
PATIENT Sgt KALINOWSKA, A
AGE 44 SEX M

SERIAL NO. 15013
CASE NO. 67210

DATE 7 DEC 1967
DOCTOR GLADMAN

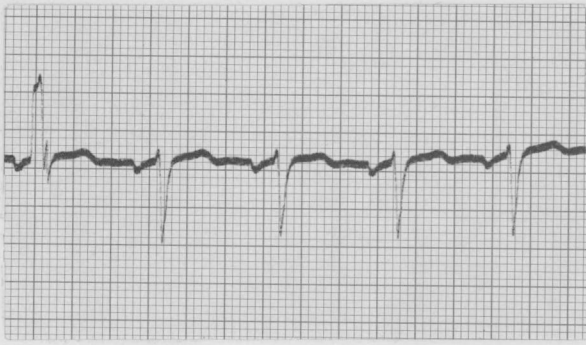


*Taken Fasting @ 0815 hrs
by DM Arken Sgt*

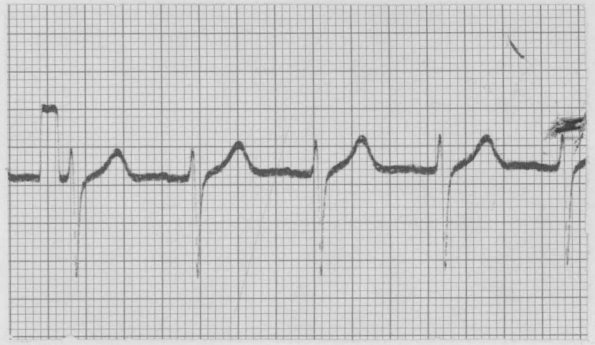


AURICULAR RATE _____ P-R INTERVAL _____ PATIENT POSITION _____
VENTRICULAR RATE _____ Q-R-S INTERVAL _____ ELECTRICAL AXIS _____
RHYTHM _____ S-T SEGMENT _____
REMARKS _____

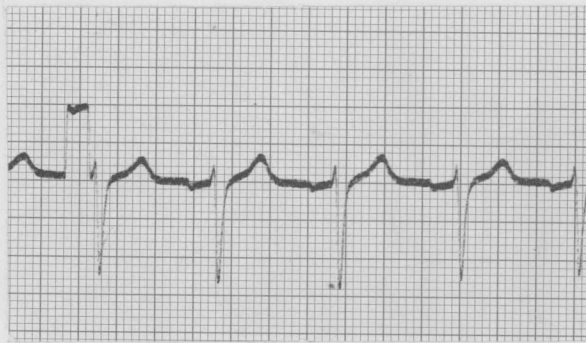
LEAD
CF₁
CR₁
CL₁
V₁



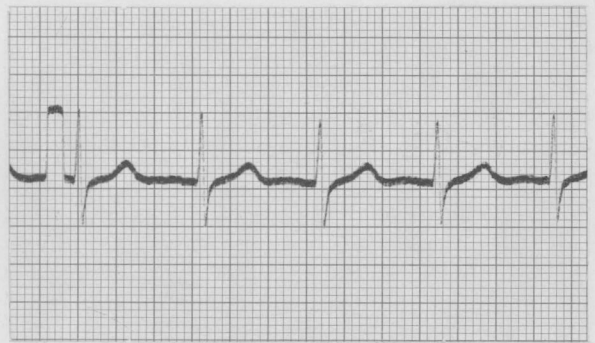
LEAD
CF₄
CR₄
CL₄
V₄



LEAD
CF₂
CR₂
CL₂
V₂



LEAD
CF₅
CR₅
CL₅
V₅



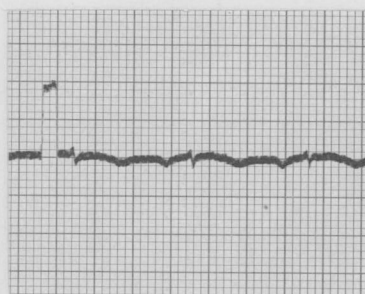
LEAD
CF₃
CR₃
CL₃
V₃



LEAD
CF₆
CR₆
CL₆
V₆



LEAD VR AVR



LEAD VL AVL



LEAD VF AVF

X-RAY REQUISITION AND REPORT

SURNAME KALICHUK		FIRST NAME AND INITIALS Alexander		SERVICE NO. 15113
RANK Sgt	SERVICE RSF	AGE 44	PARENT UNIT CFB Clinton Ont	
X-RAY DEPARTMENT AT: CFB Clinton Ont		REPORT TO BE FORWARDED TO: (OFFICE)		

38

CLINICAL INFORMATION AND DIAGNOSIS:

EXAMINATION REQUESTED:

Annual over 40

IF ROUTINE CHEST	TECHNICIANS USE ONLY
ADMISSION <input type="checkbox"/>	
ENROLMENT <input type="checkbox"/>	14 X 17
RELEASE <input type="checkbox"/>	
ANNUAL <input type="checkbox"/>	10 X 12
SERVICE REQ. <input type="checkbox"/>	8 X 10

DATE 4 Dec 67	M.O.'S SIGNATURE DJ Gladman Major	FILM NO. 7030	DATE OF EXAMINATION 7 Dec 67
-------------------------	---	-------------------------	--

P.A. Chest

No change in the general appearance of this chest from a film of Oct. 6/66.

No active lung disease. Pleural spaces are clear.

Heart chest ratio is 13.2/31.7.

W.L. Teskey
Wm.L. Teskey, M.D.
RADIOLOGIST

im 8.12.67

NAME 15113 Sgt K. Lichuk, A
ADDRESS CFB GUSTON ONT

DATE 7 Dec 67
AGE 44
BY D. J. [unclear]

Ambco Otometer **AUDIOGRAM**

39

67507

150

LEFT EAR

RIGHT EAR

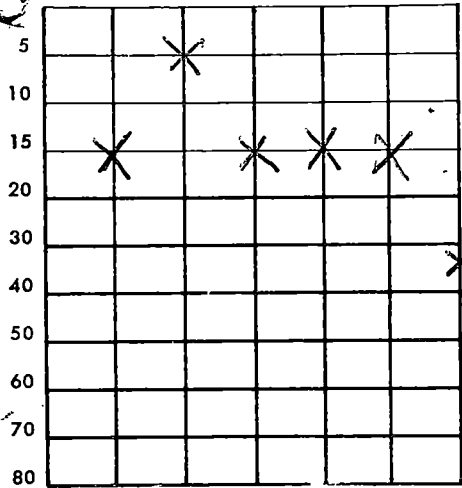
500 1000 2000 3000 4000 6000

500 1000 2000 3000 4000 6000

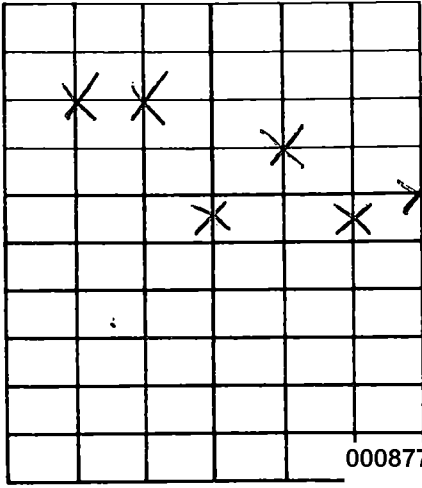
Normal 0

0

Loss in Decibels



0



000877

DEPARTMENT OF VETERANS AFFAIRS

SERVICE NO. 5113 NAME KALICHUK, Alex

ADDRESS C. F. B. Clinton, Ontario.

		SPH.	CYL.	AXIS	PRISM	
DISTANCE	O.D.					
	O.S.					
READING	O.D.	+1.75				
	O.S.	+1.75				

REMARKS

READING GLASSES AS ABOVE.

IS DISABILITY PENSIONABLE.....

DATE 27 June 68

OCULIST C. A. Thompson, M.D. 000878

DEPARTMENT OF NATIONAL DEFENCE
REQUISITION ON A CONTRACT

NO.	DDP/QP CONTRACT NO
-----	--------------------

Dept of National Defence
SERVICE

ON

TO
Imperial Optical Co Ltd
247 Queens Avenue
London Ont

TO THE CONTRACTOR

YOU ARE REQUESTED TO SUPPLY THE FOLLOWING MATERIEL/SERVICES IN ACCORDANCE WITH THE TERMS OF THE ABOVE REFERENCED CONTRACT.
ONLY MATERIEL/SERVICES INCLUDED IN THE CONTRACT SHALL BE SUPPLIED AGAINST THIS REQUISITION.
EACH DELIVERY SHALL BE ACCOMPANIED BY A PACKING NOTE OR DELIVERY SLIP.
PLEASE ADVISE THE UNDERSIGNED IF THE DELIVERY DATE CANNOT BE MET.
INVOICES SHALL BE PREPARED IN ACCORDANCE WITH THE INSTRUCTIONS SET OUT IN THE CONTRACT.

DELIVER TO
Base Commander
CFB Clinton
Ont

30

J. H. Stewart
for H Florent F/L
Base Medical Officer

DELIVERY DATE Within 72 Hours

20 May 67
DATE

FOR DEPARTMENT OF NATIONAL DEFENCE

CONTRACT ITEM NO	REF./STOCK NO	MATERIEL/SERVICES	QUANTITY	UNIT
------------------	---------------	-------------------	----------	------

15113

Sgt

KALICHUK A

Number

Rank

Name and Initials

1 Please supply the above named with:

- (a) Spectacles as per accompanying prescription, in suitable frames and cases, in accordance with DDP contract
- ~~(b) Such optical repairs or services as may be required to restore his present spectacles to a fully serviceable condition.~~

2 One copy of this form signed by the recipient of the spectacles or services performed is to accompany the invoices which you submit monthly under terms of the DDP contract.

3 Please note that personnel are permitted to obtain alternate non-flammable acetate frames of their choice by paying the difference in cost between the frames specified in the contract.

Received in good order:

A Kalichuk
Signature

Sgt
rank

2 June 67
date

Blackwood of Crystal D?

May 30-67

46 - 26 x 4 3/4

PD 73/66

monostep
1 1/2 high

PRESCRIPTION FOR SPECTACLES

ORDONNANCE DE VERRES

Enclosure No.
Numéro du document

Service No. - Numéro matricule 15/133		Rank - Grade SGT	Name - Nom KALICHAUK A.			Unit - Unité
DISTANCE	O. D.	Sphere - Sphère + .50	Cylinder - Cylindre ✓	Axis - Axe	Prism - Prisme	Base
	O. S.	+ .50	✓			
READING LENS OR BIFOCAL SYSTEM LENTILLE DE LECTURE OU LENTILLE BIFOCAL	O. D.	+ 1.25	✓			
	O. S.	+ 1.25	✓			
Date: 23/5/67			Signature of M/O: Signature du médecin militaire: <i>[Signature]</i>			

Contractor will ensure that Frame Data is completed.

Le fournisseur devra s'assurer que les renseignements concernant la monture sont indiqués.

Inter-pup, distance - Distance interpupillaire	Bridge - Pont	Temple - Branche	Lens size - Dimension des lentilles
--	---------------	------------------	-------------------------------------

REMARKS - REMARQUES:

Great top bifocal type - MONOSTEP
Type -

151 pair

BR 23/5

000880



DEPARTMENT OF NATIONAL DEFENCE
CANADIAN FORCES MEDICAL SERVICE
CASE SHEET OPTHALMOLOGY

zk

SURNAME Kalichuk		GIVEN NAMES A		SERVICE NUMBER 15113
RANK Sgt		ADMISSION DATE DAY MONTH YEAR		ADMISSION NUMBER
UNIT OR SHIP CFB Clinton Ont				
INSTITUTION				PLACE

Referred to F/L Rain by BMedO Date 23 May 67

Reason for Examination refraction age 43 years

History: Dr. Thompson's Rx +1.25 cu N.P.
25^a ex. tropia +37^a H₀ at near
bb - " increment for his job?

Anterior Segment Rt. Lt.
N N

Eye	VISION		REFRACTION				Vision After
	Before	+2.50	Sphere	Cylinder	Axis	Prism	
Rt.	20/20	/	+ .50				20/20
Lt.	20/20	/	+ .50				20/20

Glasses: Rt. Sph. +.50 Cyl. Axis READING +1.25 add
Prescribed: Lt. Sph. +.50 Cyl. Axis READING +1.25 add

Pupils N N
Tension: Rt. Lt.
Cover Test: 20 Ft. 15 Ins. *orth* *med. us. R/L*
Maddox Rod: 20 Ft. 15 Ins. *orth*

Cardinal Positions:
Full *orth* steady: Nov. phoria.
Convergence *14* Cms. Accommodation { Rt. Cms.
Lt. Cms. Lt. Cms.

Fundi and Media Rt. *ng*
Lt. *ng*

Fields: -

Colour Vision

DIAGNOSIS presbyopia & squint

Remarks and/or Treatment:
Re above in sv
- monostep seq.

Blarigas (Ophthalmologist)

Date 23/5/67 Hospital *bl*

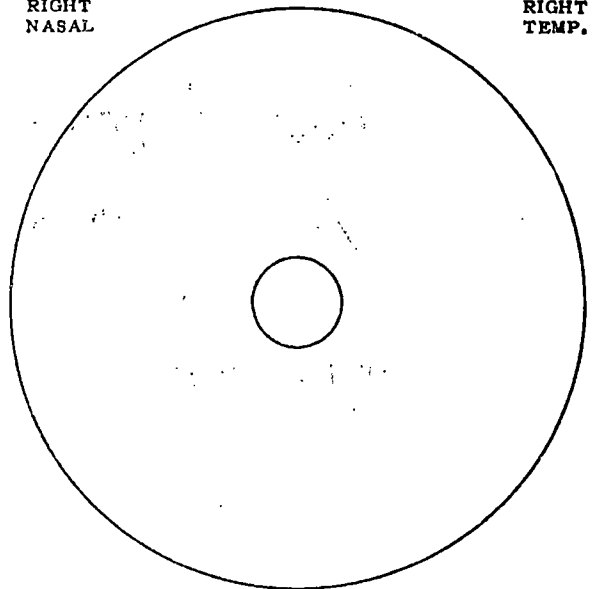
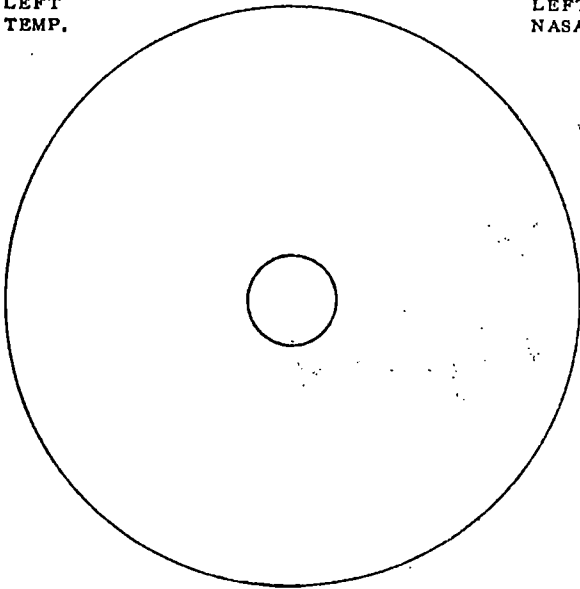
FUNDI

LEFT
TEMP.

LEFT
NASAL

RIGHT
NASAL

RIGHT
TEMP.



Remarks:

md
md

FIELD STUDY

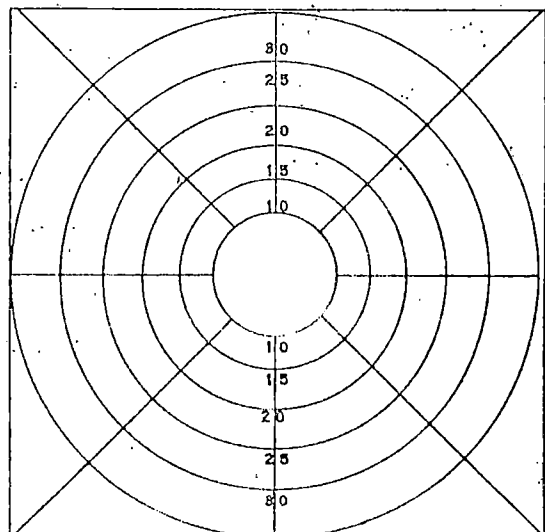
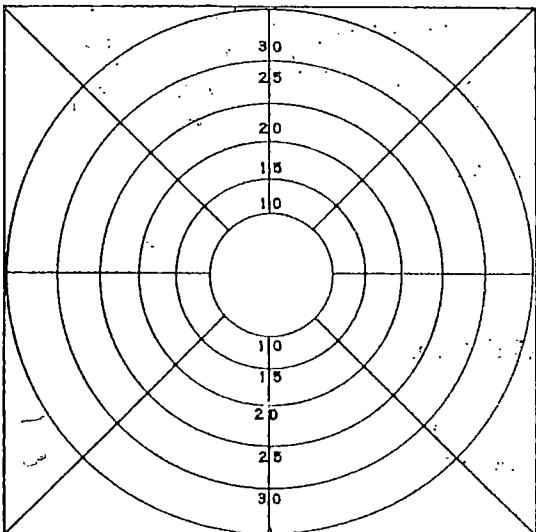
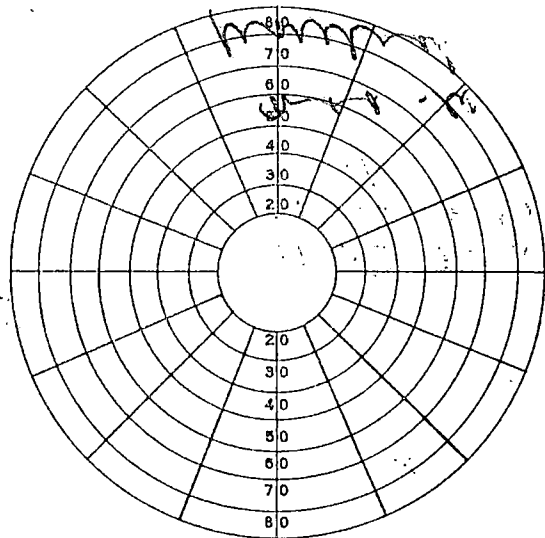
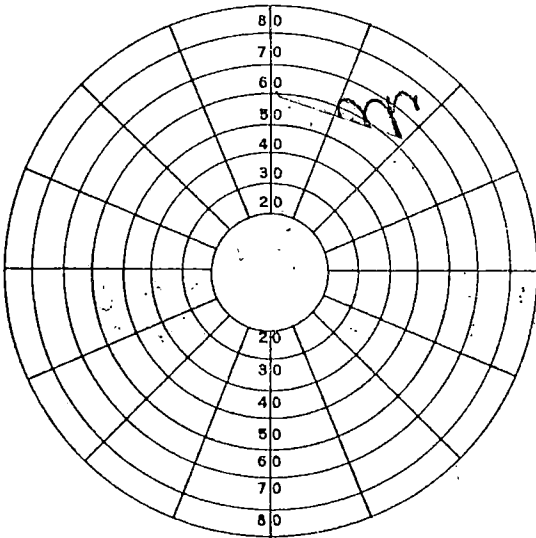
Test Object COLOUR
SIZE
DISTANCE

Illumination

V.O.S.

PERIMETER

V.O.D.



TEST OBJECT

CANADIAN FORCES MEDICAL SERVICE
CASE HISTORY

FACILITY PROVIDING CARE CFB HOSPITAL CLINTON		
ADMISSION NO. 457	ADMISSION DATE 26 FEB 67	RELIGION RC
SURNAME KALICHUK		FIRST NAME AND INITIALS ALEXANDER
		SERVICE NUMBER 15113
RANK SGT	FORCE RCAF	AGE 43
PARENT UNIT CFB CLINTON ONT		
NEXT OF KIN Mrs. A. Kalichuk		RELATIONSHIP Wife
ADDRESS OF NEXT OF KIN R.R.#4 Walton, Ont		

33

CONDITION ON ADMISSION ELEC <input checked="" type="checkbox"/> FIVE <input type="checkbox"/> SERIOUS <input type="checkbox"/> EMERGENCY <input type="checkbox"/>	DATE OF DISCHARGE 27 FEB 67	TRANSFERRED: FROM: _____ TO: _____	DIAGNOSIS ONLY
IF ACCIDENT, STATE CIRCUMSTANCES			

DIAGNOSIS ON ADMISSION
 Cut on Left fore head.

FINAL DIAGNOSIS (IN ORDER OF IMPORTANCE)	MORBIDITY CODE
1. LACERATION OF (L) FOREHEAD	
2.	
3.	

OPERATIONS	DATE	ANAESTHETIC
1.		
2.		
3.		

SUMMARY (COMPLAINTS, PHYSICAL AND LABORATORY EXAMINATION FINDINGS, TREATMENT, ETC.)

This SGT was cut on left forehead by a dish thrown at him by his wife.

Reparation of a deep cut of 1½ inches in length with 7 stitches with Silk 000000.

RECOMMENDATIONS (FURTHER TREATMENT, CONVALESCENCE, LIMITATIONS AS TO WORK, ETC.)

M & D

DATE LIKELY FIT FOR WORK	SIGNATURE OF MEDICAL OFFICER I/C CASE H. FLORENT F/L
--------------------------	---

2034

James
MMU
(32)

TREATMENT SERVICES

KALICHUK, ALEX 9657
15113 RC 03NOV23
CFB CLINTON

SURNAME, GIVEN NAMES

RECORD NO.

CASE SHEET

SERVICE NO. (OR RANK)

DATE OF BIRTH

OPHTHALMOLOGY

15113

Sgt Kalichuk Alexander - 3 Nov 23-SupTech-RC-M

MO: Mrs A Kalichuk (Wife) PMQs Adastral Park Ont.

Referred to Ophthalmology Clinic BY F/L MacKenzie

Reason for Examination Original Appt.

History: Referred for Ophthalmology examination on advice of optometrist.

Anterior Segment	Rt.	<u>normal.</u>	Lt.	<u>normal.</u>
------------------	-----	----------------	-----	----------------

Eye	VISION		REFRACTION			ADD	Vision After
	Before	<u>+ 2.50</u>	Sphere	Cylinder	Axis	<u>Plm</u>	
Rt.	<u>20/20</u>		<u>+0.25</u>			<u>+1.00</u>	<u>20/20</u>
Lt.	<u>20/20</u>		<u>+0.25</u>			<u>+1.00</u>	<u>20/20</u>

Glasses: { Rt. Sph. +0.25 Cyl. Axis READING +1.00
 Prescribed: { Lt. Sph. +0.25 Cyl. Axis READING +1.00

Pupils
 Tension: Rt. normal. Lt. normal.

Cover Test: 20 Ft. Exotropia 25 prism dioptres. 15 Ins. 37 prism dioptres.
 Maddox Rod: 20 Ft. 15 Ins.

Cardinal Positions:
 While it appears that the patient is able to view on the worth dots, this is not so and he suppresses his left eye.

Convergence Cms. Accommodation { Rt. Cms.
..... Cms. { Lt. Cms.

Fundi and Media { Rt. Clear and normal.
 Lt.

Fields:

Colour Vision

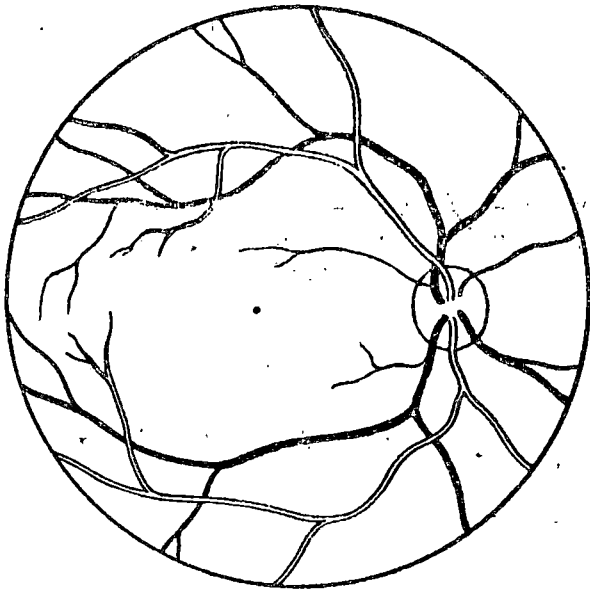
DIAGNOSIS

Remarks and/or Treatment:
GLASSES FOR READING AS ABOVE.

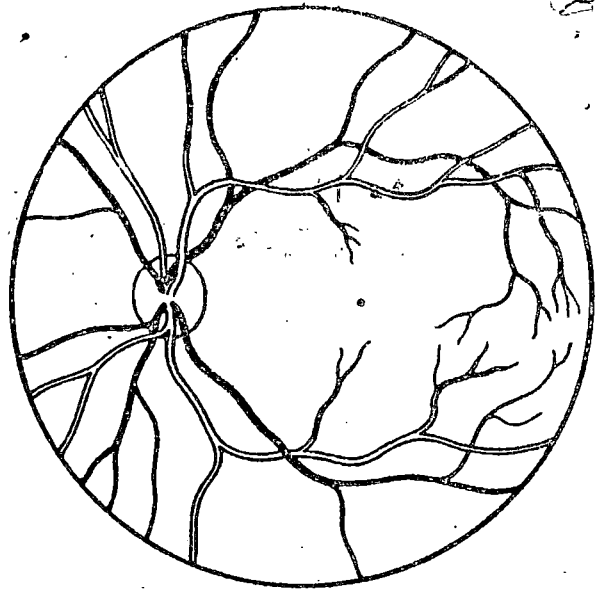
Date 24 Nov 66 Ophthalmologist C. A. Thompson, M.D.
/vk

FUNDI

Right Eye

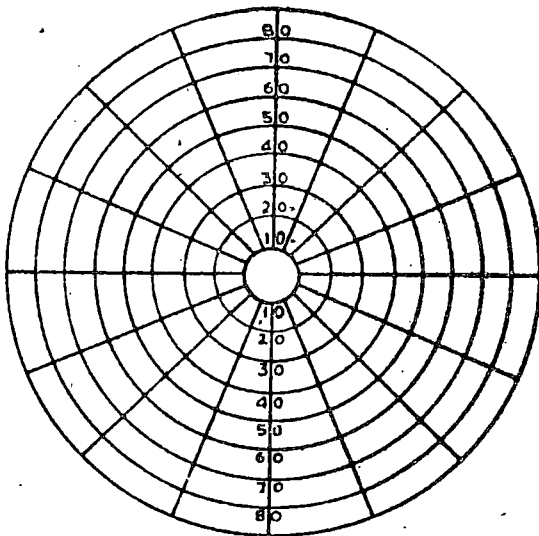


Left Eye

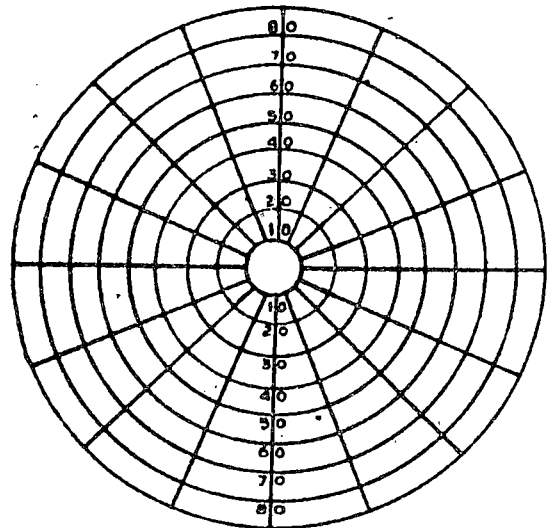


FIELD STUDY

Left Eye



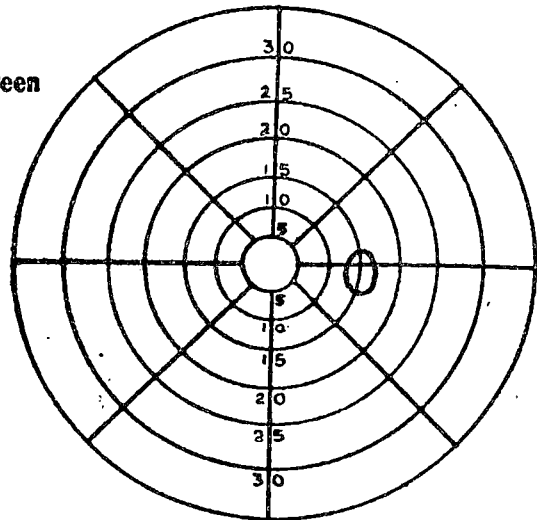
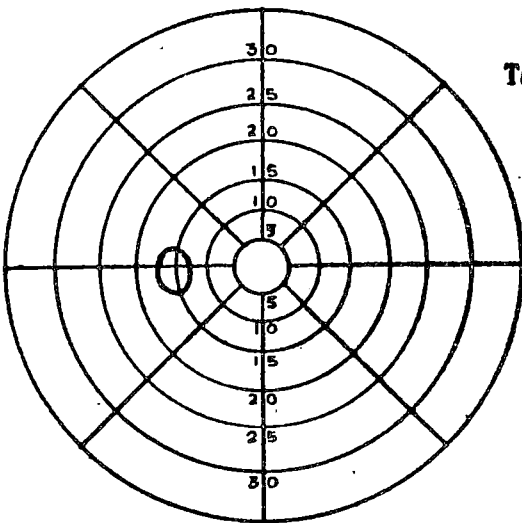
Right Eye



Perimeter

**Colour
Test object, Size
Distance**

Tangent Screen



**Colour
Test object, Size
Distance**

DEPARTMENT OF NATIONAL DEFENCE
CANADIAN FORCES MEDICAL SERVICE
CASE SHEET OPTHALMOLOGY

0900 HOURS



SURNAME KALICHUK		GIVEN NAMES A	SERVICE NUMBER 15113
RANK Sgt	ADMISSION DATE DAY MONTH YEAR		ADMISSION NUMBER
UNIT OR SHIP CFB Clinton Ont			
INSTITUTION Base Hospital			PLACE Clinton Ont

Referred to F/L Rain Clinton Ont by MO Clinton Ont Date 25 Oct 66

Reason for Examination Refraction age 23 years

History: lt. presbyopic trouble
lt. stay on long distance part on
the reading portion. O.S. turns out
a prolonged N.P. work.

Anterior Segment | Rt. N Lt. N

Eye	VISION		REFRACTION				Vision After
	Before	+2.50	Sphere	Cylinder	Axis	Prism	
Rt.	<u>20/20</u>	<u>/</u>	<u>sphere</u>				<u>20/20</u>
Lt.	<u>20/20</u>		<u>plane</u>				<u>20/20</u>

Glasses: Rt. Sph. Cyl. Axis. READING
Prescribed: Lt. Sph. Cyl. Axis. READING

Pupils Tension: Rt. N Lt. N

Cover Test: 20 Ft. orthophoria 15 Ins. orthophoria

Maddox Rod: 20 Ft. 15 Ins.

Cardinal Positions:

Convergence Cms. Accommodation { Rt. Cms.
..... Cms. { Lt. / Cms.

Fundi and Media | Rt. central macula pupils are quite
Lt. are normal small. today and it
is appeared is difficult to view

Fields: the peripheral area

Colour Vision

DIAGNOSIS Squint.

Remarks and/or Treatment:
Has a squint - alternate -
OD is his dominant eye
Recommend referral to see an
ophthalmologist in DVA
BR Raju MD
(Ophthalmologist)

Date 25. X. 66 Hospital cl

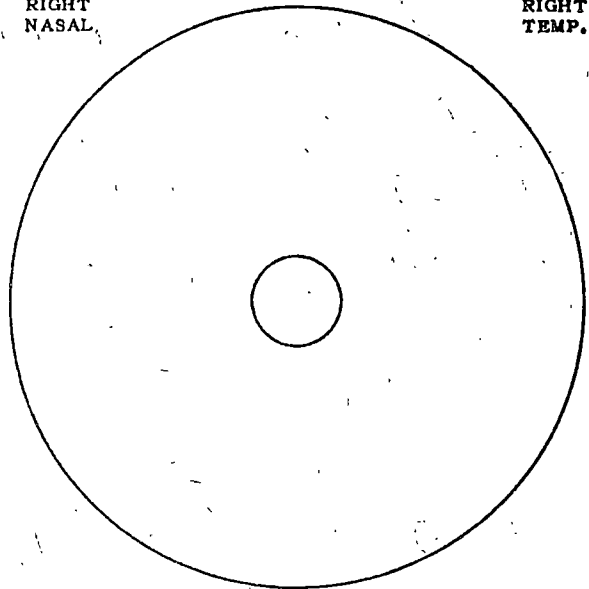
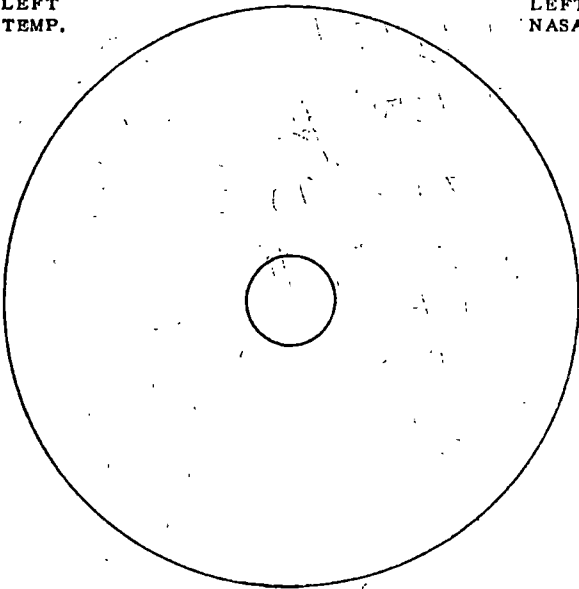
FUNDI

LEFT
TEMP.

LEFT
NASAL

RIGHT
NASAL

RIGHT
TEMP.



Remarks:

FIELD STUDY

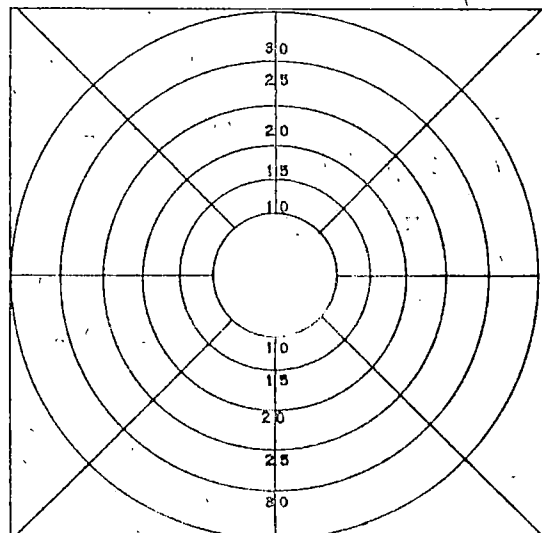
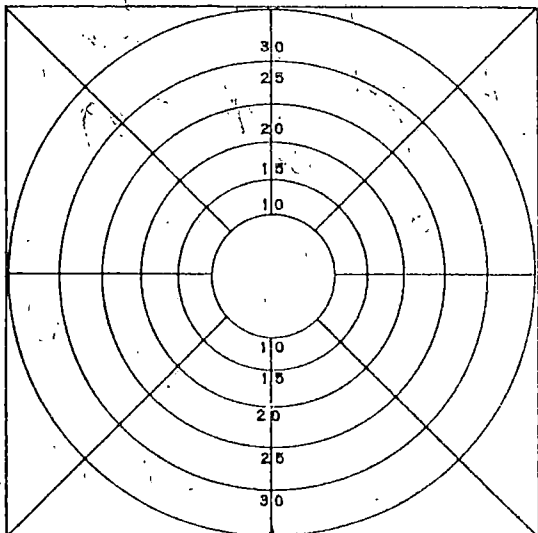
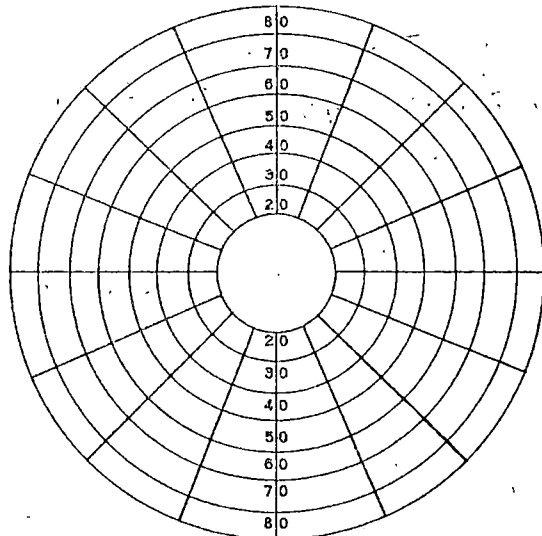
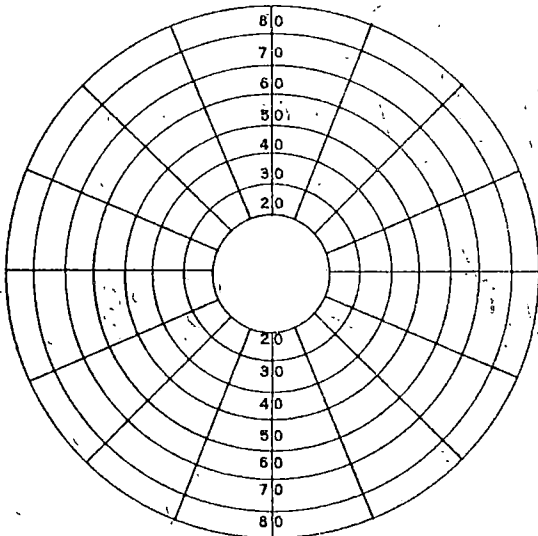
Test Object COLOUR
SIZE
DISTANCE

Illumination

V.O.S.

PERIMETER

V.O.D.



TEST OBJECT

DEPARTMENT OF VETERANS AFFAIRS

31

SERVICE NO. 15113 NAME KALICHUK, Alex

ADDRESS CFB CLINTON

		SPH.	CYL.	AXIS	ADD PRISM
DISTANCE	O.D.				
	O.S.				
READING	O.D.	+0.25			+1.00
	O.S.	+0.25			+1.00

REMARKS

GLASSES FOR READING AS ABOVE

IS DISABILITY PENSIONABLE

DATE 24 Nov 66

OCULIST C. A. Thompson, M.D.

000888

RECORD OF MEDICAL EXAMINATION
(Other than on Enrolment, Release, Annual Flying)

Enclosure Number in
Medical Envelope

29

Purpose of Examination Annual Over 40 Medical	Examination Unit CFB Clinton Ont
--	-------------------------------------

PART I - SERVICE PARTICULARS

Name KALICHUK Alexander	Rank Sgt	Number 15113
Establishment CFB Clinton Ont	Trade Supply Tech	
Date of Enrolment 24 Jan 50	Date of Birth 3 Nov 23	Service RCAF (REG)

PART II - HISTORY AND/OR FINDINGS PERTINENT TO EXAMINATION
(consultant's reports to be attached/referred to where indicated)

History and physical examination - Normal

Diagnosis: OVER 40

PART III - MEDICAL OFFICER'S RECOMMENDATIONS (State specific limitations)

FIT OVER 40

3 Nov 67

Date for next examination/Board

PART IV

CATEGORY OR PROFILE	RCN		ARMY								RCAF						CATEGORY	
	Cat	Visual Stand	YOB	P	U	L	H	E	M	S	VISION	COLOUR VISION	HEAR-ING	HANDS	ARMS	LEGS		OTHER FACTORS PRESENT
PRESENT											1	1	1	1	1	1	0	A4B
RECOMMENDED											1	1	1	1	1	1	0	A4B

Date 20 Oct 66

Signature of Examining Medical Officer
Signature Examining Medical Officer

Remarks Approving Medical Officer

Date

Signature and Appointment Approving Medical 000889

PART V - PHYSICAL EXAMINATION

EXAMINATION		Consi- dered normal	See below	EXAMINATION		Consi- dered normal	See below
1	General appearance	N		15	Lungs	N	
2	Body Frame: Sm _____ Med <u>N</u> Lg _____	(1)		16	Heart	N	
3	Height: ft. <u>5</u> ins. <u>7</u>			17	Breasts	N	
4	Weight (Stripped) <u>155</u> lbs.			18	Pulse Rate <u>80</u>	N	
5	Vision: s glasses R <u>20/15</u> L <u>20/15</u> c glasses R _____ L _____			19	Blood Pressure: S <u>130</u> D <u>88</u>		
6	Colour Vision: Plates _____ Lantern _____		20	Abdomen			
7	Pupils: Light _____ Acc _____	N	21	Genitalia			
8	Visual Field _____	N	22	Hemial Orifices			
9	Fundi _____	N	23	Anus			
10	Hearing: WV R <u>N</u> L <u>N</u> CV R <u>N</u> L <u>N</u>		24	Rectal Exam (digital)			
11	Ears & Tympani: R _____ L _____	N	25	Skin			
12	Mouth & Teeth		26	Varicosities			
13	Nose & Throat	N	27	Lymphatic Glands			
14	Chest: Min. _____ Max. _____		28	Thyroid			
			29	Extremities: Upper _____ Lower _____			
			30	Spine			
			31	CNS			
			32	Emotional Status	N		
33	Chest X-Ray: Date <u>12 Oct 66</u> Report <u>Neg</u>						
34	Urinalysis: SG <u>1.018</u> Alb <u>Neg</u> Sugar <u>Neg</u> Microscopic <u>Nil</u>						
35	Electrocardiogram: Date <u>6 Oct 66</u> Report <u>Normal</u>						
36	Other Lab Tests _____ _____ _____						

POSITIVE FINDINGS AND/OR REMARKS:

(1) States he has trouble when reading. Appt with the optometrist taken.

SP

CBS HOSPITAL, CLINTON

Q10
KALECHUK, A.

5389
19113

6 Oct. '66
12:00 PM

The rate is 82. Rhythm is sinus.

P-R interval .16 seconds. Comparison with Nov. '65 shows no change in a normal ECG.

JAL:sh

J.A. Lewis, M.D.

6 Oct. '66

PATIENT Sgt Kalichuk
AGE 42 SEX M

^{REG}SERIAL NO. 15113
CASE NO. 5389

DATE 6 Oct 1966
DOCTOR MacKenzie-HL



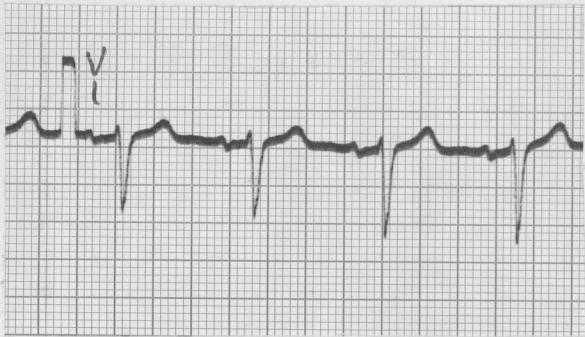
*Taken Fasting 6 Oct 66
@ 0800 hrs by Ed Cohen*



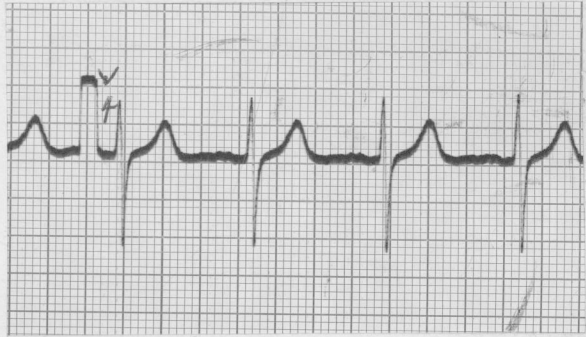
AURICULAR RATE _____ P-R INTERVAL _____ PATIENT POSITION _____
VENTRICULAR RATE _____ Q-R-S INTERVAL _____ ELECTRICAL AXIS _____
RHYTHM _____ S-T SEGMENT _____

REMARKS

LEAD
CF₁
CR₁
CL₁
V₁



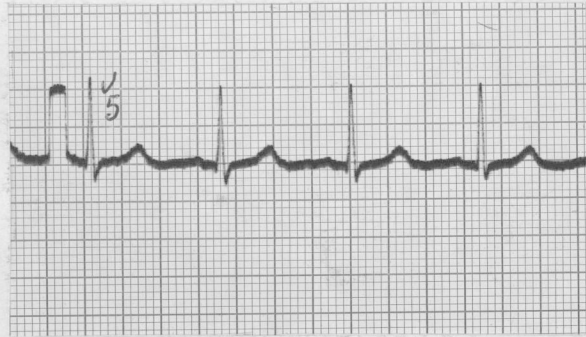
LEAD
CF₄
CR₄
CL₄
V₄



LEAD
CF₂
CR₂
CL₂
V₂



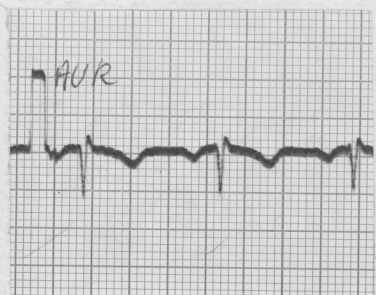
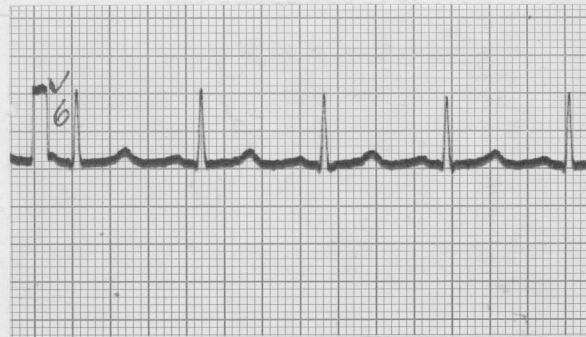
LEAD
CF₅
CR₅
CL₅
V₅



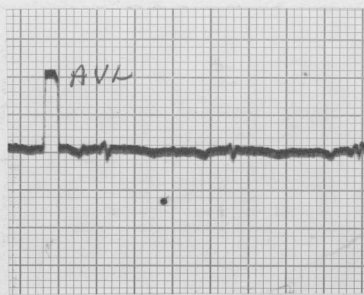
LEAD
CF₃
CR₃
CL₃
V₃



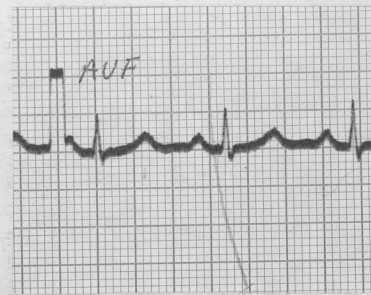
LEAD
CF₆
CR₆
CL₆
V₆



LEAD VR AVR



LEAD VL AVL



LEAD VF AVF

C. FB Clinton ON

#630

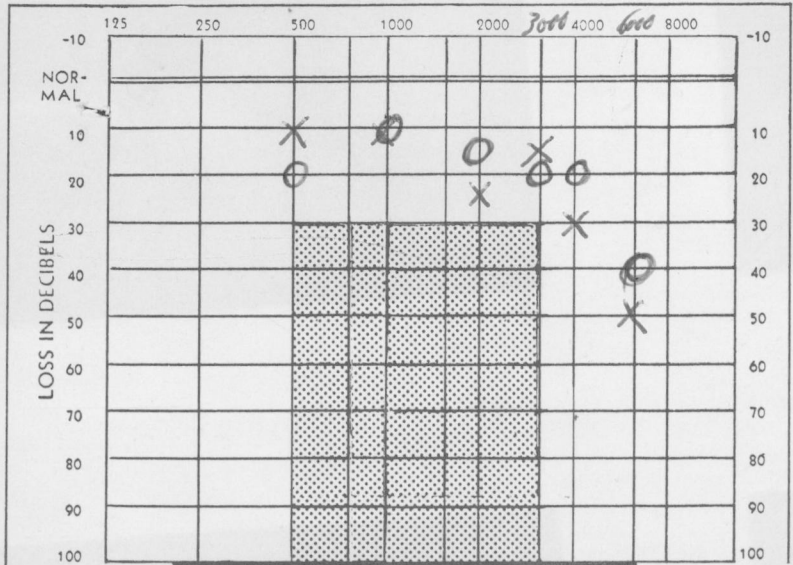
15113
15113
SGT KALICHUK, A

FORM 102 REV. 27

DATE 6 Oct 66 BY DML

MAICO AUDIOGRAM

NAME



	LEFT EAR	RIGHT EAR
	BLUE	RED
AIR	X	O
AIR WITH MASKING	□	△
BONE COND WITH MASKING	<	>
DB INTENSITY OF MASKING		

A. M. A. % HEARING LOSS

L. _____ R. _____ COMB. _____

	LEFT EAR	RIGHT EAR
S. R. T.		
M. C. L.		
T. D.		

000894

DEPARTMENT OF NATIONAL DEFENCE
 CANADIAN FORCES MEDICAL SERVICE
 X-RAY REQUISITION AND REPORT

25



CANADA

SURNAME KALICHUK		GIVEN NAMES Alexander	
RANK Sergeant	AGE 42	SERVICE NUMBER 15113	
UNIT OR SHIP CFB Clinton Ont			
INSTITUTION Base Hospital			
PLACE Clinton Ont	ADMISSION DATE DAY MONTH YEAR		ADMISSION NUMBER

*CLINICAL INFORMATION

- (*BRIEF HISTORY
- *CLINICAL FINDINGS
- *PREVIOUS X-RAYS)

EXAMINATION REQUESTED Chest XRay - Annual Over 40 Medical	ROUTINE CHEST ADM.....() ENROL.....() RELEASE.....() ANNUAL.....() OTHER
DATE 6 Oct 66	

AMBULATORY.....() WHEEL CHAIR.....() STRETCHER.....() BED.....()	CLINICAL DIAGNOSIS <div style="text-align: center;">BW Wilton Capt</div> SIGNATURE OF MEDICAL OFFICER REQUESTING EXAMINATION
---	---

RADIOGRAPHERS USE ONLY	STATE OFFICE TO WHICH THIS REPORT IS TO BE FORWARDED
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RADIOLOGICAL REPORT	FILM NUMBER 5382	DATE
---------------------	----------------------------	------

P.A. CHEST.

No active lung disease.

KJ. 12 Oct 66

Norman B. ...
 Norman B. ...
 RADIOLOGIST

RECORD OF MEDICAL EXAMINATION
(Other than on Enrolment, Release, Annual Flying)

Enclosure Number in
Medical Envelope

25

Purpose of Examination: **Over 40 Medical** Examination Unit: **RCAF Stn Clinton Ont**

PART I - SERVICE PARTICULARS

Name: **KALICHUK Alexander** Rank: **Sgt** Number: **15113**
 Establishment: **RCAF Stn Clinton Ont** Trade: **SupTech**
 Date of Enrolment: **21 Jan 50** Date of Birth: **3 Nov 23** Service: **RCAF (REG)**

PART II - HISTORY AND/OR FINDINGS PERTINENT TO EXAMINATION
(consultant's reports to be attached/referred to where indicated)

History and functional. Inquiry nil of note since discharge from Hosp. (25-29 Jan 65) following a bout of alcoholic gastritis where he made a good recovery.

NAD

Diagnosis: **Over 40**

PART III - MEDICAL OFFICER'S RECOMMENDATIONS (State specific limitations)

FIT OVER 40

3 DEC 1966

Date for next examination/Board

PART IV

CATEGORY OR PROFILE	RCN		ARMY										RCAF					OTHER FACTORS PRESENT	CATEGORY
	Cat	Visual Stand	YOB	P	U	L	H	E	M	S	VISION	COLOUR VISION	HEAR-ING	HANDS	ARMS	LEGS			
PRESENT												1	1	1	1	1		A4B	
RECOMMENDED												1	1	1	1	1		A4B	

Date: **2 Dec 65**

(VE Raz)Dr

Signature Examining Medical Officer

Remarks Approving Medical Officer

Date

Signature and Appointment Approving Medical Officer

PART V - PHYSICAL EXAMINATION

EXAMINATION		Consi- dered normal	See below	EXAMINATION		Consi- dered normal	See below
1	General appearance	N		15	Lungs	N	
2	Body Frame: Sm _____ Med <u>N</u> Lg _____			16	Heart	N	
3	Height: ft. <u>5</u> ins. <u>7</u>			17	Breasts	N	
4	Weight (Stripped) <u>152</u> lbs.			18	Pulse Rate <u>84</u>		
5	Vision:			19	Blood Pressure: S <u>120</u>		
	a glasses R <u>20/15</u> L <u>20/15</u>				D <u>80</u>		
	c glasses R _____ L _____			20	Abdomen		(1)
6	Colour Vision: Plates _____	CVN		21	Genitalia	N	
	Lantern _____	N		22	Hemial Orifices		
7	Pupils: Light _____			23	Anus		
	Acc _____			24	Rectal Exam (digital)		
8	Visual Field _____			25	Skin		
9	Fundi _____	N		26	Varicosities		
10	Hearing: WV R _____ L _____			27	Lymphatic Glands		
	CV R <u>SEE AUDIOGRAM</u>			28	Thyroid		
11	Ears & Tympani: R _____	N		29	Extremities: Upper _____		
	L _____				Lower _____		
12	Mouth & Teeth			30	Spine		
13	Nose & Throat	N		31	CNS		
14	Chest: Min. _____ Max. _____			32	Emotional Status	N	
33	Chest X-Ray: Date <u>30 NOV 65</u> Report _____						
34	Urinalysis: SG <u>NSQ</u> Alb <u>NIL</u> Sugar <u>NIL</u>						
	Microscopic _____ N/A						
35	Electrocardiogram: Date _____ Report _____						
36	Other Lab Tests _____						

POSITIVE FINDINGS AND/OR REMARKS:

(1) Well healed non symptomatic appendectomy scar

DEPARTMENT OF NATIONAL DEFENCE
 CANADIAN FORCES MEDICAL SERVICE
 X-RAY REQUISITION AND REPORT

(H)



SURNAME KALICHUK		GIVEN NAMES Alexander	
RANK Sgt	AGE 42	SERVICE NUMBER 15113	
UNIT OR SHIP RCAP Stn Clinton Ont			
INSTITUTION RCAP Infirmary			
PLACE Clinton Ont	ADMISSION DATE DAY MONTH YEAR		ADMISSION NUMBER

*CLINICAL INFORMATION

- (*BRIEF HISTORY
- *CLINICAL FINDINGS
- *PREVIOUS X-RAYS)

EXAMINATION REQUESTED Over 40 Medical	ROUTINE CHEST ADM.....() ENROL.....() RELEASE.....() ANNUAL.....() OTHER
DATE 30 Nov 65	

AMBULATORY.....() WHEEL CHAIR.....() STRETCHER.....() BED.....()	CLINICAL DIAGNOSIS <div style="text-align: right;"> (J MacKenzie) F/L SIGNATURE OF MEDICAL OFFICER REQUESTING EXAMINATION </div>
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RADIOGRAPHERS USE ONLY	STATE OFFICE TO WHICH THIS REPORT IS TO BE FORWARDED
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RADIOLOGICAL REPORT	FILM NUMBER 4499	DATE 3 Dec 65
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P.A. CHEST.

The heart is not enlarged. There is no evidence of active pulmonary disease or pleural effusion.

[Signature]
 M.A. BLOOMFIELD, M.D.
 RADIOLOGIST

ELECTROCARDIOGRAM TRACING.

GRAF CLINTON.

23

WARD:OPG..... RECORD NUMBER: ..?????..... DATE: 30 November, 1965.

NAME: KALICHUK, A.....Sgt.....15113..... DOCTOR: D.N.D.....

The rate is 86. The rhythm is sinus, with P-R interval measuring .16 seconds.

There is no axis deviation or evident myocardial damage.

J. A. Lewis

JAL:kb.

J. A. Lewis, M.D.

30 Nov 65.

PATIENT Sgt Kalichuk
AGE 42 SEX M

SERIAL NO. 15113
CASE NO. 5191

DATE 30 Nov 65
DOCTOR Boydell (32)

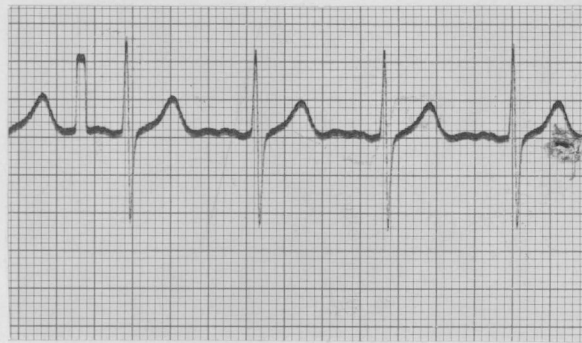


AURICULAR RATE _____ P-R INTERVAL _____ PATIENT POSITION _____
VENTRICULAR RATE _____ Q-R-S INTERVAL _____ ELECTRICAL AXIS _____
RHYTHM _____ S-T SEGMENT _____
REMARKS _____

LEAD
CF₁
CR₁
CL₁
V₁



LEAD
CF₄
CR₄
CL₄
V₄



LEAD
CF₂
CR₂
CL₂
V₂



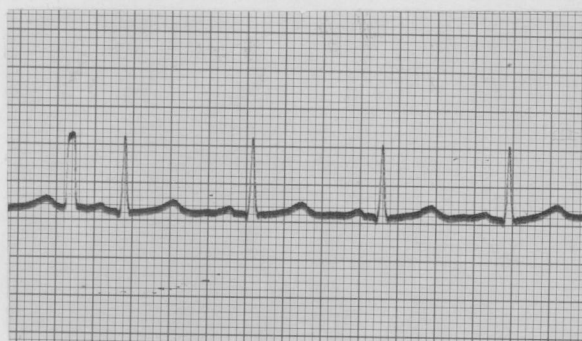
LEAD
CF₅
CR₅
CL₅
V₅



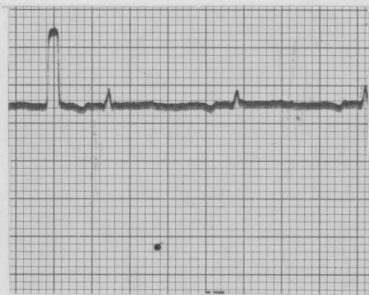
LEAD
CF₃
CR₃
CL₃
V₃



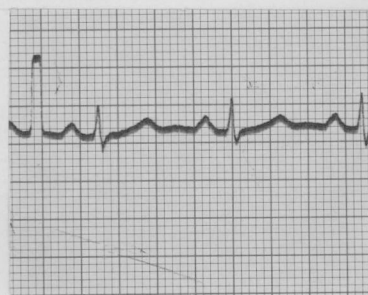
LEAD
CF₆
CR₆
CL₆
V₆



LEAD VR AVR



LEAD VL AVL



LEAD VF AVF

330

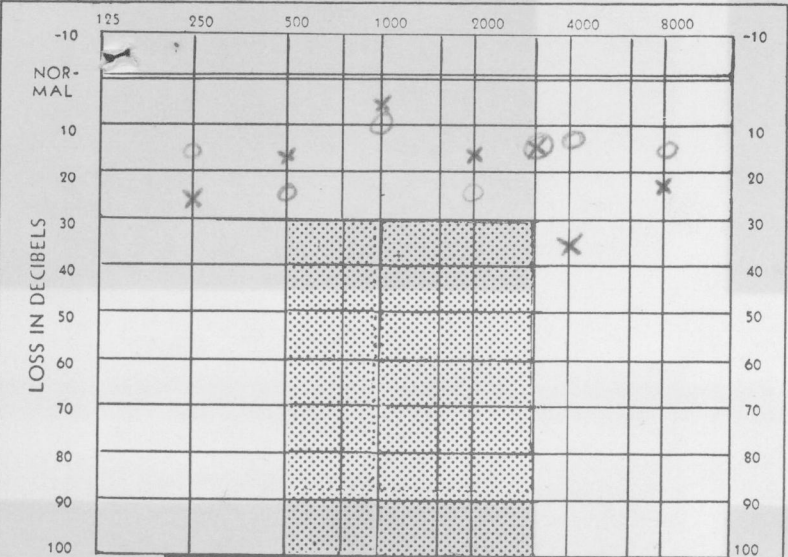
150 standard

FORM 102 REV.

DATE 30/10/65 BY J. Walsh

MAICO AUDIOGRAM

KALICHUK NAME A.



	LEFT EAR	RIGHT EAR
	BLUE	RED
AIR	×	○
AIR WITH MASKING	□	△
BONE COND WITH MASKING	<	>
DB INTENSITY OF MASKING		

A. M. A. % HEARING LOSS

L. _____ R. _____ COMB. _____

	LEFT EAR	RIGHT EAR
S. R. T.		
M. C. L.		
T. D.		

000902

CASE HISTORY



CANADA

NAME KALICHUK		GIVEN NAME Alec		SERVICE NUMBER 15113	
RANK SGT	TRADE SUPPLY	FORCE RCAF		DATE OF BIRTH 3 NOV 23	AGE 40
SHIP OR UNIT RCAF STN CENTRALIA		RELIGION RC	ADMISSION NUMBER 71		
CIVILIAN ADDRESS RR#4 WALTON ONT				PREVIOUS ADMISSION DATES	
NEXT OF KIN AND ADDRESS MRS A KALICHUK (Wife) AS ABOVE					
INSTITUTION INFIRMARY		PLACE STN CENTRALIA		WARD OR WING	
DATE OF ADMISSION 25 JAN 65	TRANSFERRED FROM	CONDITION ON ADMISSION ELECTIVE <input type="checkbox"/> SERIOUS <input type="checkbox"/> EMERGENCY <input type="checkbox"/>		REFERRED BY DR McClure	

HEADQUARTERS USE ONLY	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46
	DATE OF DISCHARGE 29 JAN 65		DAYS IN HOSPITAL 4				DAYS SICK LEAVE				DISPOSAL 1 day																

DATE OF DISCHARGE 29 JAN 65	DAYS IN HOSPITAL 4	DAYS SICK LEAVE	DISPOSAL DUTY <input type="checkbox"/> EXCUSED DUTY <input type="checkbox"/> 1 day OUT PATIENT <input checked="" type="checkbox"/> TRANSFER <input type="checkbox"/> HOME <input type="checkbox"/>															
---------------------------------------	------------------------------	-----------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

TRANSFERRED TO	CONDITION ON DISPOSAL RECOVERED <input type="checkbox"/> IMPROVED <input type="checkbox"/> NOT IMPROVED <input type="checkbox"/> DEAD <input type="checkbox"/> DIAGNOSIS ONLY <input type="checkbox"/>	
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IF ACCIDENT STATE CIRCUMSTANCES

DIAGNOSIS ON ADMISSION
Acute alcoholic gastritis

FINAL DIAGNOSES (IN ORDER OF IMPORTANCE)		MORBIDITY CODE
1.	Acute alcoholic gastritis	
2.		
3.		

OPERATIONS	DATE	A N A
1.		E S T
2.		H E T
3.		I C

SUMMARY (COMPLAINTS, PHYSICAL AND LABORATORY EXAMINATION FINDINGS, TREATMENT, ETC.)

Admitted with epigastric pain, nausea and vomiting following heavy week-end drinking. Patient had some tenderness in the epigastrium. It was felt he had an acute alcoholic gastritis. He recovered on RX with soft diet, dioval and bed rest. On discharge his symptoms had subsided.

RECOMMENDATIONS (FURTHER TREATMENT, CONVALESCENCE, LIMITATIONS AS TO WORK, ETC.)

DVA-TS (REV.-9-51) 71	DATE LIKELY FIT FOR WORK	SIGNATURE OF MEDICAL OFFICER I/C CASE (JA McClure) F/L
-----------------------	--------------------------	--

000903

ADMISSION NOTES

Drinking heavily all week-end. Last evening unable to eat supper then sudden onset of sharp epigastric pain about 9.00 PM. Nausea & vomiting since then - specks of blood in vomitus. Pain has persisted.

PROVISIONAL DIAGNOSIS

SIGNATURE OF ADMITTING OFFICER

DATE

CLINICAL NOTES WITH SIGNATURES

90

DEPARTMENT OF NATIONAL DEFENCE
CANADIAN FORCES MEDICAL SERVICE
X-RAY REQUISITION AND REPORT

REGULAR



SURNAME KALICHUK		GIVEN NAMES Alec	
RANK SGT	AGE 40	SERVICE NUMBER 15113	
UNIT OR SHIP CENTRALIA			
INSTITUTION STN INFIRMARY			
PLACE CENTRALIA	ADMISSION DATE DAY MONTH YEAR 25 Jan 65		ADMISSION NUMBER

***CLINICAL INFORMATION**

- (*BRIEF HISTORY
- *CLINICAL FINDINGS
- *PREVIOUS X-RAYS)

EXAMINATION REQUESTED	ROUTINE CHEST
(1) Chest	ADM.....()
(2) Flat plate - abdomen	ENROL.....()
	RELEASE.....()
	ANNUAL.....()
	OTHER
DATE 25 Jan 65	

Heavy drinker and drinking all week-end. Last night developed sharp epigastric pain. Has had nausea & vomiting since - specks of blood in vomitus. OE - Heart appears enlarged. Pulsating tender mass in epigastrium.

AMBULATORY.....() WHEEL CHAIR.....() STRETCHER.....() BED.....()	CLINICAL DIAGNOSIS Alcoholic gastritis	(JA McClure) F/L SIGNATURE OF MEDICAL OFFICER REQUESTING EXAMINATION
---	--	---

RADIOGRAPHERS USE ONLY 2 - 14 x 17 (D Vaughan) Sgt	STATE OFFICE TO WHICH THIS REPORT IS TO BE FORWARDED SMO RCAF STN CENTRALIA
--	---

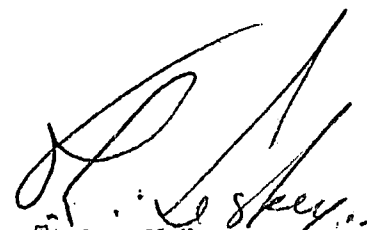
RADIOLOGICAL REPORT	FILM NUMBER 1947	DATE 25 Jan 65
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P.A. CHEST AND FLAT PLATE OF THE ABDOMEN.

Chest: Lung fields and pleural spaces are clear.

Heart chest ratio is 11.7 to 31.0.

Flat film of the abdomen shows small amount of gas in the small and large bowel, not abnormal. No abnormal shadows noted in the KUB tract.


Em. L. Teskey, M.D.
 RADIOLOGIST

PATIENT KALCHUK A SERIAL NO. 15113 DATE 10 NOV 64
AGE 42 SEX SST. (m) CASE NO. 2033 DOCTOR S M O RCAF
Centralia

5'5 1/2"
150 lb

18

LEAD 1



LEAD 2

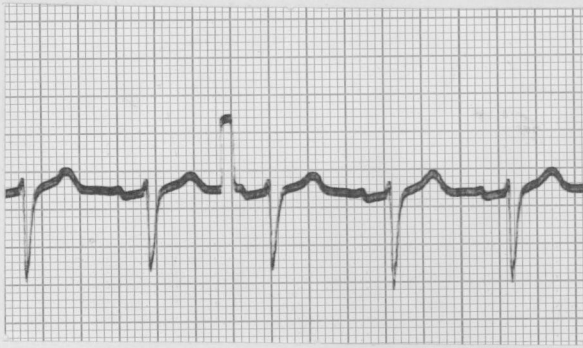


LEAD 3

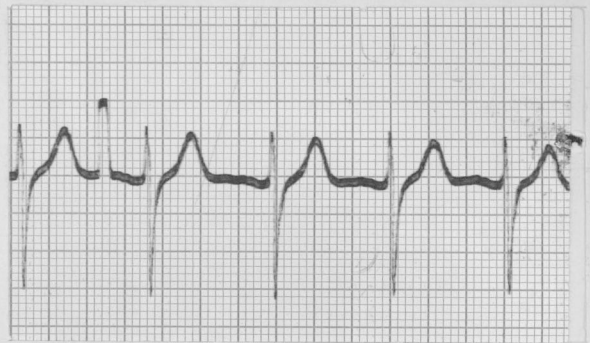


AURICULAR RATE _____ P-R INTERVAL _____ PATIENT POSITION _____
VENTRICULAR RATE _____ Q-R-S INTERVAL _____ ELECTRICAL AXIS _____
RHYTHM _____ S-T SEGMENT _____
REMARKS _____

LEAD
CF₁
CR₁
CL₁
V₁



LEAD
CF₄
CR₄
CL₄
V₄



LEAD
CF₂
CR₂
CL₂
V₂



LEAD
CF₅
CR₅
CL₅
V₅



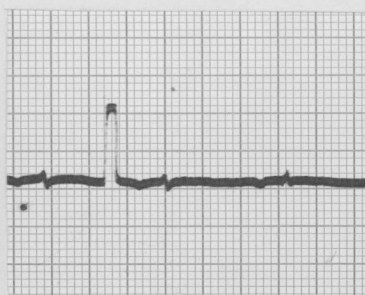
LEAD
CF₃
CR₃
CL₃
V₃



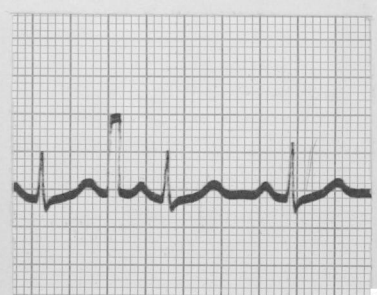
LEAD
CF₆
CR₆
CL₆
V₆



LEAD VR AVR



LEAD VL AVL



LEAD VF AVF

RECORD OF MEDICAL EXAMINATION
(Other than on Enrolment, Release, Annual Flying)

Enclosure Number in
Medical Envelope 11

Purpose of Examination OVER 40 MEDICAL	Examination Unit RCAF STN CENTRALIA ONT
--	---

PART I - SERVICE PARTICULARS

Name KALICHUK Alexander	Rank SGT	Number 15113
Establishment STN CENTRALIA	Trade SUPPLY TECH	
Date of Enrolment 21 JAN 50	Date of Birth 3 NOV 23	Service RCAF(REG)

PART II - HISTORY AND/OR FINDINGS PERTINENT TO EXAMINATION
(consultant's reports to be attached/referred to where indicated)

Healthy individual with no complaints.

Diagnosis: **Over 40**

PART III - MEDICAL OFFICER'S RECOMMENDATIONS (State specific limitations)

Fit

Date for next examination/Board 1 yr

PART IV

CATEGORY OR PROFILE	RCN		ARMY							RCAF					CATEGORY			
	Cat	Visual Stand	YOB	P	U	L	H	E	M	S	VISION	COLOUR VISION	HEAR-ING	HANDS		ARMS	LEGS	OTHER FACTORS PRESENT
PRESENT											1	1	1	1	1	1	-	A4B
RECOMMENDED											1	1	1	1	1	1	-	A4B

Date 10 Nov 64

(R Arnot) F/L

Signature Examining Medical Officer

Remarks Approving Medical Officer

Date _____

Signature and Appointment Approving Medical Officer

000909

PART V - PHYSICAL EXAMINATION

EXAMINATION		Consi- dered normal	See below	EXAMINATION		Consi- dered normal	See below
1	General appearance			15	Lungs		
2	Body Frame: Sm _____ Med _____ Lg _____			16	Heart		
3	Height: ft. <u>5</u> ins. <u>6</u>			17	Breasts		
4	Weight (Stripped) <u>154</u> lbs.			18	Pulse Rate <u>78</u>		
5	Vision:			19	Blood Pressure: S <u>120</u> D <u>80</u>		
	s glasses R <u>20/20</u> L <u>20/20</u>			20	Abdomen		
	c glasses R _____ L _____			21	Genitalia		
6	Colour Vision: Plates _____ Lantern _____			22	Hemial Orifices		
7	Pupils: Light _____ Acc _____			23	Anus		
8	Visual Field _____			24	Rectal Exam (digital)		
9	Fundi _____			25	Skin		
10	Hearing: WV R _____ L _____ CV R _____ L _____			26	Varicosities		
11	Ears & Tympani: R _____ L _____			27	Lymphatic Glands		
12	Mouth & Teeth			28	Thyroid		
13	Nose & Throat			29	Extremities: Upper _____ Lower _____		
14	Chest: Min. _____ Max. _____			30	Spine		
				31	CNS		
				32	Emotional Status		

33 Chest X-Ray: Date 10 Nov 64 #1833 Report Negative

34 Urinalysis: SG 1.028 Alb Neg Sugar Neg
Microscopic Occ'1 WBC/HPF Mucous Threads

35 Electrocardiogram: Date 13 Nov 64 Report Category 2. GA Sears MD,
CME File No 29169

36 Other Lab Tests Audiogram

POSITIVE FINDINGS AND/OR REMARKS:

DEPARTMENT OF NATIONAL DEFENCE
 CANADIAN FORCES MEDICAL SERVICE
 X-RAY REQUISITION AND REPORT

16

REGULAR



SURNAME KALICHUK		GIVEN NAMES Alexander	
RANK SGT	AGE 41	SERVICE NUMBER 15113	
UNIT OR SHIP RCAF STN CENTRALIA			
INSTITUTION RCAF INFIRMARY			
PLACE CENTRALIA	ADMISSION DATE DAY MONTH YEAR		ADMISSION NUMBER

*CLINICAL INFORMATION

- (*BRIEF HISTORY
- *CLINICAL FINDINGS
- *PREVIOUS X-RAYS)

EXAMINATION REQUESTED PA Chest	ROUTINE CHEST ADM.....() ENROL.....() RELEASE.....() ANNUAL.....() OTHER Over 40 <input checked="" type="checkbox"/>
DATE 10 Nov. 64	

AMBULATORY.....() WHEEL CHAIR.....() STRETCHER.....() BED.....()	CLINICAL DIAGNOSIS <div style="text-align: right;"> (R Arnot) F/L <small>SIGNATURE OF MEDICAL OFFICER REQUESTING EXAMINATION</small> </div>
---	---

RADIOGRAPHERS USE ONLY <i>1-14417</i> <i>Way e 975</i>	STATE OFFICE TO WHICH THIS REPORT IS TO BE FORWARDED SMO RCAF STN CENTRALIA
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RADIOLOGICAL REPORT	FILM NUMBER 1. F33	DATE 10 Nov. 64
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NEGATIVE

[Signature]
Wm. I. TINSLEY, M.D.
 RADIOLOGIST
 NOV. 17/64

ROYAL CANADIAN AIR FORCE AUDIOGRAM

RCAF M56A

13

NUMBER 15113 RANK SGT NAME KALICHUK, A.
 AGE LAST BIRTHDAY 42 TRADE Sup/Trg DATE ENLISTED _____

EAR TESTED	THRESHOLD	HEARING LOSS (DECIBELS RE NORMAL THRESHOLD)						
		FREQUENCY (CYCLES PER SECOND)						
		256	512	1024	2048	2896	4096	8192
RIGHT	DISAPPEARANCE	0	5	-5	-5	-5	0	0
	APPEARANCE	5	10	0	0	0	5	5
LEFT	DISAPPEARANCE	0	-5	-5	-5	-5	0	0
	APPEARANCE	5	0	0	0	0	5	5

OPERATOR'S NUMBER 122316 RANK CPL NAME HALL, W.S.

AUDIOMETER SERIAL NUMBER 4691

PLACE TESTED 1msd Central DATE TESTED 10 Nov 64

KALICHUK ALEXANDER E
15113 RC

9657
3 NOV 23

14a

RCAF STN AYLMEER ONT
MRS H KALICHUK WIFE
RR 4 WALTON ONTARIO

21 JUL 59
834-R-24

SEC 18



CANADA

WESTMINSTER HOS.
LONDON ONT.

D% (N.P.)
21 JULY 59

HEADQUARTERS USE ONLY																												
	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	
DATE OF DISCHARGE 31-7-59	DAYS IN HOSPITAL						DAYS BICK LEAVE						DISPOSAL															
TRANSFERRED TO												CONDITION ON DISPOSAL																
												RECOVERED <input type="checkbox"/> IMPROVED <input checked="" type="checkbox"/> NOT IMPROVED <input type="checkbox"/> DEAD <input type="checkbox"/>																
IF ACCIDENT STATE CIRCUMSTANCES																												
DIAGNOSIS ON ADMISSION																												
FINAL DIAGNOSES (IN ORDER OF IMPORTANCE)																												
1. Psychoneurosis Anxiety Reaction																				MORBIDITY CODE								
																				000-X01								
OPERATIONS																												
1.																				DATE	A	N	A					
2.																					E	S	T					
3.																					H	E	T					
																					I	C						
SUMMARY (COMPLAINTS, PHYSICAL AND LABORATORY EXAMINATION FINDINGS, TREATMENT, ETC.)																												
<p>This 35 year old man was admitted to D3/4 22-7-59. On admission he was tense and nervous, and anxiety and depression were obvious. He settled down well in hospital and had a short course of Tofranil plus psychotherapy in the course of which some of his problems were ironed out. He is now asymptomatic, is cheerful and friendly and keen to leave hospital and return to duty.</p> <p>He will be S.O.S. as of this afternoon.</p>																												
RECOMMENDATIONS (FURTHER TREATMENT, CONVALESCENCE, LIMITATIONS AS TO WORK, ETC.)																												
See above.																												
DVA-TS 100 (REV. 9-51)												DATE LIKELY FIT FOR WORK												SIGNATURE OF MEDICAL OFFICER I/C CASE				
IBM-1 (BRADMA)																								Frank McCrystal, M.D. for H.B. Carscallen, M.D.				

Pensionable Disability

None

Admission Notes

Admission recommended by Dr. Hobbs

~~Chest X-Ray~~ Chest X-Ray Completed - Refer to Dental

Occupation Airman

Employer's Name & Address

Family Doctor Name Address

Provisional Diagnosis
NP NYD

Section

Signature of Admitting Officer

DATE

CLINICAL NOTES WITH SIGNATURES

21-7-59 NEUROPSYCHIATRIC CLINIC

This man's problem and history well outlined on attached report from W/C Beach.

Admit to D3/4 for further investigation.

/ss

G.E.Hobbs, M.D.

/gk

20-7-59 HAEMATOLOGY: Hgb 17.1 gms%, Hct 50, WBC 14,800, ESR 8, Neut. 83%, Lymphs 10%,
Monos. 7%, RBC's normal. Plat. adeq.

20-7-59 BIOCHEMISTRY: AG 92 mgs%, PG 81 mgs%, Urea 15 mgs%.

20-7-59 URINALYSIS: Amber, acid, 1.025, alb. neg., glu. neg., wbc rare, few epi cells,

22-7-59 ADMISSION NOTE

This man was today admitted to D3/4. On admission he appeared nervous, depressed and anxious. He did not talk freely and was not inclined to discuss the reasons for him being sent to hospital. However, under pressure, he did give some account of himself.

On May 28th, our patient was charged by the Ontario Provincial Police, St. Thomas, detachment, with illegal possession of liquor and also with an offence under the juvenile act; that of contributing to delinquency of a child under 16 years. The child in this case was a ten year year old girl. He told a rambling story about being friendly with an elderly couple, man and woman, who have a bird sanctuary in the St. Thomas district. He stated that himself and the old man had become quite friendly and had decided to give some children in the neighbourhood a party and have some games, etc.

In order that they should have prizes to give to the children, he purchased five pairs of girls panties and several boxes of candy. However, the plans for the party fell through and on the day in question he had several shots of liquor in the Sergeants' Mess at Aylmer, R.C.A.F. Station and several beers later in the afternoon. He stated he was driving aimlessly around the back roads of St. Thomas and became lost. He met a ten year old girl and stopped the car to ask her for directions back to the main road. When he had been talking to the girl for several minutes, her father came along and directed him back to St. Thomas. He had several more beers in St. Thomas, entered his car, and again commenced driving in an aimless fashion in the St. Thomas district. Purely by chance he stated, he found himself on the same road where he had met the ten year old girl earlier in the afternoon. A police car stopped him and interrogated him and searched his car. In the car was found a partly consumed bottle of spirits and the panties and candy already referred to.

O.P.P. officers took him to the farm house where the ten year old girl lived with her parents and upon her identification of him, charges already referred to were laid against him.

The following week he appeared in Magistrate's Court in St. Thomas and was found not guilty of the charge concerning the girl. He pleaded guilty to the liquor charge and was fined.

When questioned about the incident regarding the girl he was extremely vague and evasive. Indeed he professed very little recollection of the court proceedings and when asked if the child had testified that he had invited her

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CASE HISTORY SHEET CONTINUATION

RECORD No. 9657

NAME KALICHUE ALEXANDER E.

SERVICE NUMBER 15113

ADMISSION NUMBER

INSTITUTION

WESTMINSTER HOSPITAL

PLACE LONDON ONTARIO

DATE

CLINICAL NOTES WITH SIGNATURES

into the car, he stated he could not remember. He, however, stated that the magistrate, at the conclusion of the case, told him he was giving him the benefit of the doubt, but that if he ever saw him again the verdict might be entirely different.

He stated his home is in Seaforth and he is home every weekend. His wife is a Polish refugee and was a widow when he married her. She has two children by her first marriage and one child of which he is the father. He states his home life is very happy and denies all problems - financial, sexual or otherwise. He said he could not remember if he had ever masturbated. Our patient was in the army from 1941-1946 and had a good record.

He joined the Air Force in 1950 and in that year was convicted in Trenton of indecent behaviour. When questioned about this he developed nearly complete amnesia and under pressure gave a rather inadequate explanation. He admitted drinking to excess and said the only problem that he now has is that it would be very awkward for him if he is discharged from the service after fifteen years. He talked about W/C Beach and P/L Catton, the latter being Medical Officer at Aylmer R.C.A.F. Station, and he was quite paranoid in thinking. He denied ever being depressed or ever having thought life was not worth living and he referred continually to the fact that he has a good service record. He, further, went on to say that his Commanding Officer had a letter from G.H.C. regarding the advisability of his being retained in the R.C.A.F. He stated he had been sleeping well and his appetite was good.

SUMMARY

Despite this man's protestations, there is little doubt that he is nervous, very depressed and anxious, and I would say that he has guilt feelings.

RECOMMENDATION:

Consultation with Dr. G.E. Hobbs, and Dr. E.V. Metcalfe, regarding this man.

/ek

Frank McCrystal, M.D

22-7-59

X-RAY REPORT: P.A. CHEST

No active lung disease. Pleural spaces are clear. Heart chest ratio is 12.2 to 31.8 cms.

/gk/in

Wm.L. Teskey, M.D.

24-7-59

FAMILY HISTORY

Father died at age 68 from carcinoma of the stomach. Was of Polish racial origin. Mother is now 65 and in good health. She is also of Polish racial origin. Parents are said to have been happy and were a well adjusted couple. Patient has two brothers alive and well and is third in a sibline of three.

Mental illness in the family is denied.

PERSONAL HISTORY

Patient was born 3rd November, 1923, in Dauphin, Manitoba. Birth was stated to be normal and he stated economic conditions apparently were good. He was reared in favourable surroundings. He commenced school at age six and left school at age 16 when he had completed grade ten.

OCCUPATIONAL HISTORY

He worked on a farm for six months and joined the army in 1941. He was discharged from the army in 1946 and farmed in Manitoba until 1950 when he joined the Air Force as Leading Aircraftsman. His service history is good and he has never had a charge against him.

COURT RECORD

This man had a conviction of indecent behaviour in Trenton, 1950. He was convicted of having liquor in a prohibited place in St. Thomas, 1959.

CASE HISTORY SHEET CONTINUATION

DATE	CLINICAL NOTES WITH SIGNATURES
	<p>He was also found not guilty of contributing to the delinquency of a juvenile under the age of 16 years in St. Thomas, 1959.</p> <p><u>MEDICAL HISTORY</u> Usual childhood diseases, appendectomy in 1937, gonorrhoea in 1941. Patient's health has always been quite good.</p> <p><u>ALCOHOL</u> This man admits to drinking a fair amount and occasionally drinks to excess under tension.</p> <p><u>SEX HISTORY</u> Had some formal sex instruction from his parents. He married a widow in 1954 and she has two children by her first marriage. She was 34 when she married him and is Polish born. One child has been born of this union. Sexual adjustment is claimed to be good. There is no history of previous mental illness.</p> <p><u>PRESENT ILLNESS</u> This man was depressed and anxious following his being charged on May 28th with contributing to the delinquency of a juvenile. However, the case against him was dismissed in Magistrate's court and he subsequently went on leave to Western Canada. He states he felt quite alright at that time. He, upon his return from leave, was informed by Flying Officer Malotte at Aylmer air station, that a letter had been received from Headquarters questioning the advisability of his being retained in the R.C.A.F. as his contract comes up for renewal this year. This latter disturbed him very much and when subsequently ordered to report to this hospital, he became quite upset.</p> <p>When seen following admission he was nervous, depressed and anxious. He was quite defensive as he obviously feared that any admission would damage his chances of staying in the Air Force. There also appeared to be a fair bit of problem drinking in the background.</p> <p>/gk Frank McCrystal, M.D.</p>
27-7-59	<p><u>PROGRESS NOTE:</u> This man has settled down reasonably well. I interviewed him last Friday and told him that it was my intention to give him medication for his nerves as I felt he was depressed. He was started on Tofranil one tablet q.i.d.</p> <p>/gk Frank McCrystal, M.D.</p>
27-7-59	<p><u>PHYSICAL EXAMINATION</u> <u>General Appearance:</u> well, nourished and well developed. Going bald. <u>Scars, marks, etc:</u> Appendectomy scar. <u>Hair:</u> Fair, balding.</p> <p><u>HEAD AND NECK</u> <u>Eyes:</u> fundi normal, ocular movements normal, pupils: round, equal, react to light and accommodation. <u>Ears:</u> tympanic membranes not visualized, <u>Nose:</u> clear, <u>Teeth and Gums:</u> good repair, <u>Tongue:</u> clean, <u>Throat:</u> not injected, <u>Tonsils:</u> Tonsillectomy 1946, <u>Thyroid Gland:</u> not palpable.</p> <p><u>CHEST:</u> <u>Respirations:</u> good and equal. No adventitious sounds.</p> <p><u>HEART:</u> No enlargement. No murmurs. Heart regular. Pulse 126-regular, volume and tension good. <u>Arteries:</u> not palpable. <u>Varicosities:</u> none, <u>B.P.:</u> 120/80.</p> <p><u>C.N.S.:</u> <u>Cranial Nerves:</u> intact, <u>Speech:</u> normal, <u>Co-ordination:</u> normal, <u>Rombergism:</u> none, <u>Gait:</u> normal, <u>Clonus:</u> none, <u>Tremors:</u> none, <u>Tendon Reflexes:</u> physiological, brisk <u>Cutaneous Reflexes:</u> Physiological. <u>Sensation:</u> Normal.</p> <p><u>ABDOMEN AND EXTERNAL GENITALIA:</u> Appendectomy scar. Normal genitalia. No hernia <u>MUSCULO-SKELETAL SYSTEM:</u> Normal. <u>SKIN & LYMPHATICS:</u> Normal.</p> <p>/gk Frank McCrystal, M.D.</p>

CONSULTANT REPORT



CANADA

SURNAME KALICHUK	GIVEN NAMES ALEXANDER	SERVICE NUMBER 15113
RANK SGT	ADMISSION DATE	ADMISSION NUMBER
INSTITUTION RCAF Stn Aylmer Infirmary		PLACE

REFERRED TO: **W/C BEACH - PSYCHIATRY** DATE: **9 JUN 59**

SUMMARY OF COMPLAINTS, PHYSICAL AND LABORATORY EXAMINATION FINDINGS, TREATMENT AND PROGRESS.
Referred, at request of CO, for evaluation of personality.

He has recently been charged with aiding the delinquency of a juvenile in St. Thomas, but was extremely lucky to have the charge dismissed. After some afternoon drinking, he tried to entice of 10 year old female into the car by showing her some gifts. However, the girl's father happened along, and the charge resulted.

In 1950, he had a civil conviction for indecent exposure in Trenton.

Lately, he has been drinking to excess with increased frequency. He has family problems as well. A civil suit against a son is pending as a result of a play accident.

And a second son is asthmatic. P.T.O.

INFORMATION REQUIRED:

	THIS CASE IS:	AMBULATORY	STRETCHER	SIGNATURE OF M.O. I/C CASE
		WHEELCHAIR	BED	<i>[Signature]</i> (DV Catton) F/L

CONSULTANT'S REPORT:

This 35 year old NCO was interviewed and his pertinent documents reviewed. He comes from a Polish family and is the 3rd of 3 boys. He has been accused of minor sexual misdemeanors. His family life at present is complicated by his [REDACTED]

s.19(1)

On interview he was well controlled but evasive at times and there was a definite paranoid tinge to his thinking.

Psychological testing revealed no particular sexual psychopathology as the record was swamped by overwhelming anxiety, tension, depression and guilt.

This is indicative more of a danger of an attack on himself than any further acting out in the sexual sphere.

I feel that family courts recommendation of treatment is a good one and it may be possible to relieve him of some of his anxiety etc.

DIAGNOSIS: 1. Sexual deviation 320.6 2 Anxiety reaction 310

RECOMMENDATIONS RESPECTING TREATMENT, CONVALESCENCE, FITNESS FOR GAINFUL EMPLOYMENT, OR DUTY (over)

Admit to Westminister Hospital.

SIGNATURE OF CONSULTANT A.M. BEACH W/C	DATE 2 Jul 59
--	-------------------------

(USE REVERSE SIDE IF ADDITIONAL SPACE IS REQUIRED)

1951

ALEXANDER

KALICHUK

His Service work record as a Sup Tech is satisfactory.

He has his own home in Seaforth and is anxious to be posted to Centralia or Clinton (from whence he came here). A transfer is due, as his job has been deleted from the Supply School establishment.

I think it worthwhile for you to talk with this man.

CONSULTANT REPORT CONTINUED:

Recommend referral to Westminster Hospital for treatment and send along a copy of this report with the patient to psychiatric clinic, Westminster Hospital.

It could be that we are dealing with the acute emotional disturbance so often seen in people with character disorders when they get caught.

P.T.O.

(DV Cation) F/L

CONSULTANT'S REPORT

13



CANADA

SURNAME Kalichuk	GIVEN NAMES Alexander	SERVICE NUMBER 15113
RANK Sgt	ADMISSION DATE	ADMISSION NUMBER
INSTITUTION RCAF Station Aylmer, Ontario		PLACE

REFERRED TO: **Psychiatric Clinic** DATE

SUMMARY OF COMPLAINTS, PHYSICAL AND LABORATORY EXAMINATION FINDINGS, TREATMENT AND PROGRESS.
All the pertinent details are included in attached referral to W/C Beach, his findings and recommendation of a period of in hospital management.

INFORMATION REQUIRED:

THIS CASE IS:	AMBULATORY	STRETCHER	SIGNATURE OF M.O. (IC CASE)
	WHEELCHAIR	BED	<i>(D V Catton) F/L</i>

CONSULTANT'S REPORT:
This man's problem and history well outlined on attached report from W/C Beach.

DIAGNOSIS:
In Abeyance

RECOMMENDATIONS RESPECTING TREATMENT, CONVALESCENCE, FITNESS FOR GAINFUL EMPLOYMENT, OR DUTY
ADMIT TO D-304 FOR FURTHER INVESTIGATION

/sb	SIGNATURE OF CONSULTANT G.H. Hobbs, M.D.	DATE 21.7.59.
-----	--	-------------------------

(USE REVERSE SIDE IF ADDITIONAL SPACE IS REQUIRED)

15M14

11

RCAF-ISM 20
50M-3-55

DEPARTMENT OF NATIONAL DEFENCE

X RAY INSPECTION OF CHEST

SECTION 1

A radiograph of the chest of

Film No. 3409

Rank Sgt Name Kalichuk Alexander

Reg. No. 15113 Unit Clinton

Civilian Address as per Registration Card

Age 33 Height Weight
26 Aug 57

Signature of Recruit

is reported as follows:—

- (a) Radiological examination does not disclose evidence of tuberculous disease of the lungs of such a nature as to indicate rejection for service in the Canadian Armed Forces except as stated below.
- (b) The transverse diameter of the heart is..... cms. as compared with a transverse diameter of the chest of..... cms.
- (c) Pathological conditions or congenital abnormalities of importance seen in the film are as undernoted. (In each instance an opinion should be expressed as to whether such was present prior to enlistment.)

Isolation Medical

**NEGATIVE
APPROVED**

[Handwritten Signature]
Radiologist

Place.....

Date.....

If a pathological condition or congenital abnormality is not observed by this method of examination, record "negative" after (c).

000921

SECTION 2

Remarks of the Internist, Surgeon or Specialist in Tuberculosis. (State whether in your opinion the lesion present antedated enlistment.)

X RAY INSPECTION OF CHEST

SECTION 3

Opinion of Consultant Physician and Radiologist as may be indicated by Section 2.

Conclusion.

NEGATIVE
APPROVED

Place.....

Date.....

Sig. Sig.

L.F. 43



ONTARIO DEPT. OF HEALTH, DIVISION OF LABORATORIES

SERODIAGNOSIS - STANDARD TESTS FOR SYPHILIS

ONTARIO PATIENT Sgt Kalichute 15115
 LAST NAME FIRST NAME MIDDLE NAME
 AGE 33 SEX M TREATED - PREVIOUS RESULT -

UNDERLINE: ROUTINE PRENATAL, SUSPECT, FOLLOW-UP, VISA
 REMARKS Worthern

DATE SPECIMEN COLLECTED

Dr. S.M.O.
 NAME OF PHYSICIAN

ACAF Stn. Clinton
 STREET AND NO.

Clinton, Ont. ONTARIO.
 TOWN OR CITY

TELEPHONE INQUIRY REGARDING REPORTS NOT PERMITTED

2794

LAB. No.

FOR LABORATORY USE ONLY

DATE	V.D.R.L.	K.W.
<u>AUG. 28. 1957</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
NON-REACTIVE		
WEAKLY REACTIVE		
REACTIVE		
QUANTITATIVE I:		
UNSATISFACTORY FOR TEST		

REASON

W.M. Wilson
 000925

LONDON

All specimens are examined by the V.D.R.L. (Venereal Disease Research Laboratory) standard slide flocculation test. Specimens which do not show reaction with the test are reported "NON-REACTIVE."

All specimens "REACTIVE" or "WEAKLY REACTIVE" with the V.D.R.L. test are tested also by the KOLMER - WASSERMAN Complement - Fixation (Cardiolipin) test.

The quantitative titre of a Reactive Specimen is reported as the highest serial dilution of serum which shows reaction. The present quantitative V.D.R.L. test may show slightly higher titre than the previous quantitative Kahn Test.

INS - INSUFFICIENT

AC - ANTICOMPLEMENTARY

N.B.: If the result of this examination presents any problem in diagnosis, please communicate with the DIVISION OF VENEREAL DISEASE CONTROL, ONTARIO DEPARTMENT OF HEALTH, 67 COLLEGE STREET, TORONTO.

000926

PART V

PHYSICAL EXAMINATION—Before completing this section, the subject of the survey will be stripped and given a complete physical examination. All defects must be recorded and if indicated specialist's opinion obtained and attached hereto.

Height: Ft. 5 Ins. 6 Weight 142 lbs. Weight on enlistment.....lbs.

EXAMINATION	NEG	POSITIVE FINDINGS AND REMARKS
Vision: s Glasses R 20 / 20 L 20 / 20		
c Glasses R / L /		
c + 2.50 R / L /		
c + 1.50 R / Blur L / Blur	X	
Colour Vision: Plates.....	X	
Lantern.....		
Hearing: WV-R 20 L 20	X	
CV-R L		
Ears: Tymp. Mem. R W L W	X	
Nose.....	X	Slight deviation of lower 2/3 of nose to the Right.
Mouth and Teeth.....	X	
Throat.....	X	
Head and Neck.....	X	
Spine.....	X	
Extremities Upper.....	X	
Lower.....	X	
Hernia..... NONE	X	
Genitalia.....	X	
Anus and Haemorrhoids.....	X	
Varicosities..... NONE	X	
Abdomen.....	X	
Joints.....	X	
Chest: Min. 33 Max. 35 1/2	X	
Lungs.....	X	
Heart.....	X	
Blood Pressure: S 138 DS 84	X	
Pulse Rate..... 76	X	
Lymphatic Glands.....	X	
Ductless Glands.....	X	
Skin.....	X	
Tremors..... None	X	
Pupils: L and A.....	X	
Reflexes.....	X	
CNS Including Emotional Status.....	X	

Chest X-ray No..... Report Chest X-Ray Retainer London

Serological Test No..... Type OMT PROV LAB Report.....

Urinalysis: Sugar NEG Albumin NEG Microscopic.....

Other Laboratory or X-ray Reports (specify).....

Summary of Positive Findings:

N/A

Grade or Category

Considered by Examining MO..... A4B

21 DEC 54
(Date)

(HH Neily) F/L
(Signature of MO Bringing Board Forward)

PART VI—RECOMMENDATION OF MEDICAL BOARD (Treatment required and disposal)

If treatment required specify nature and probable duration.

Fit for non-medical release.

PART VII NAVY Category on Enlistment Category Recommended by Medical Board	ARMY Profile on Enlistment							R.C.A.F. Profile on Enlistment							
	YOB	P	U	L	H	E	M	S	Vision	Colour Vision	Hearing	Hands	Arms	Legs	Other Factors Present
	Present Profile							Recommended by Medical Board							
								1	1	1	1	1	1		
								Category..... A4B							

Place..... RCAF STN CLINTON ONT.....
 Date..... 21 DEC 54.....
 (HH Neily) F/L..... President
 Member
 Member

PART VIII
Certified True Copy. Date..... Signature.....

PART IX
Approved By:.....
 Date.....
 Confirmed By:.....
 DATE 27 Dec 54
 Date..... INITIALS H.F. B

PART X
RE-EXAMINED AND CATEGORY (OR PROFILE) CONFIRMED:.....
 REMARKS.....
 Date..... Signature.....

PART XI
Date of Release.....
 (To be filled in by unit/ship effecting release) Signature.....

ROYAL CANADIAN AIR FORCE - CHEST X-RAY SURVEY APPENDIX "A"

Individual's Unit Clinton X-ray Unit 70MM Date 18 Sep 53

Number .15113 Name KALICHUK A. Service RCAF

Age 29 Sex M Rank CORPORAL Trade SUPPLY Length of Service (mos) 42

Address of Civilian

Medical Category Date of Medical Category

X-RAY SURVEY FINDINGS 14 x 17 Film No 12910 Date 18-9-53

No Sig Abnormality Abnormal Cardio-vascular shadow Undiag. Pul Lesion

Film Unsatisfactory - Repeat Calcifications Other (Specify below in Radiologists Remarks

Abnormal shadows are present. Tuberculosis must be ruled out Mediast. Enlarg Pleural Effusion

Tuberculosis Pleural Thickening

Further X-ray required: PA x 17 PA Lat. R..... Lat. L..... Oblique...

Clinical Investigation required: Yes No

REMARKS Consultant Physician Date

RADIOLOGIST'S REPORT Place Date Film No

Radiologist

(See over for Consultant's Findings)

7

X RAY INSPECTION OF CHEST

SECTION 1

A radiograph of the chest of

Film No.....

Rank..... **LAC** Name..... **KALICHUK A**

Reg. No..... **15113** Unit..... **RCAF STN. CLINTON ONT.**

Civilian Address as per Registration Card

..... Age..... Height..... Weight.....

Signature of Recruit.....

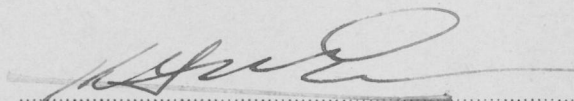
is reported as follows:—

- (a) Radiological examination does not disclose evidence of tuberculous disease of the lungs of such a nature as to indicate rejection for service in the Canadian Armed Forces except as stated below.
- (b) The transverse diameter of the heart is..... cms. as compared with a transverse diameter of the chest of..... cms.
- (c) Pathological conditions or congenital abnormalities of importance seen in the film are as under-noted. (In each instance an opinion should be expressed as to whether such was present prior to enlistment.)

ANNUAL CHEST X-RAY

**NEGATIVE
APPROVED**

Place.....



Radiologist

Date.....

If a pathological condition or congenital abnormality is not observed by this method of examination, record "negative" after (c).

SECTION 2

Remarks of the Internist, Surgeon or Specialist in Tuberculosis. (State whether in your opinion the lesion present antedated enlistment.)

SECTION 3

Opinion of Consultant Physician and Radiologist as may be indicated by Section 2.

Conclusion.

Place.....

Date.....

Sig.....Sig.....

CERTIFIED TRUE COPY

ROYAL CANADIAN AIR FORCE

R.C.A.F. R78A Revised
2M-5-49 (5894)
H.Q. 885-R-78A

620-72
COMMANDING OFFICER
R. C. A. F. STATION
CLINTON ONTARIO

OFFICER OR AIRMAN - REPORT ON ACCIDENTAL OR
SELF-INFLICTED INJURIES OR IMMEDIATE DEATH THEREFROM

6

N.B. - To be rendered in accordance with the instructions on pages 3 and 4.

1. NAME..... **KALICHUK** **Alexander**
(surname) (christian names in full)
RANK... **LAC** NUMBER **15113** UNIT... **RCAP** AGE **26** TRADE... **Exp Tech**
DATE OF ACCIDENT AND TIME OF DAY... **4 Feb 51 0700 Hrs** PLACE OF ACCIDENT... **RCAP Sta. Clinton, Ont.**
(exact locality)

2. Short statement by injured person of the circumstances (or manner) of injury (see instruction 6). Signed statements of witnesses, or of persons to whom the injured person may have mentioned his injury, to be attached (see instructions 7 and 9).

Fractured Nose
Walking down the road, and got beat up by Airman on the Station results
Fractured Nose.

A Kalichuk

N.B. - See Instruction 4 before completing the following section.

- 3. (a) Type and R.C.A.F. No. of aircraft.....
- (b) Name of pilot of aircraft (at time of crash).....
- (c) Number in aircraft, including pilot.....
- (d) Circumstances of accident: *taxiing*.....*taking off*.....*landing*.....*forced landing*.....
(designate one)
collision in air.....*collision on ground*.....*other (specify)*.....
- (e) Weather.....
- (f) In case of non-fatal crash does individual recall all events immediately preceding and following crash? If answer is "no", comment.....
- (g) Number of flying hours of person reported on: dual.....solo.....
- (h) Duty: *instructor/pilot/pupil pilot/aircrew (specify)*.....*passenger/other (specify)*.....
(strike out those not applicable)

- 4. (a) Description of injuries (in detail): **Fracture of Nasal Bones**.....
- (b) Are the injuries of such a nature that they **might** be the exciting cause of disability later?.. **No**.....
- (c) How long before initial treatment was given?..... **Within 20 Minutes**.....
- (d) whether admitted to hospital or sick in quarters... **Admitted DVA London, Ont.**.....
(give name of hospital)

DATE..... **5 Feb 51** Signature of Medical officer..... **(H. Wade) s/r**.....

5. Commanding officer's statement:

(a) Was the injury sustained

(i) In the performance of air force duty?..... NO
(See instruction 9)

(ii) In a game or other form of physical recreation approved by proper Air Force authority?.....
..... NO

(iii) on leave or pass? (State whether with or without pay)..... Pass with pay

NOTE:- If the answers to (a) (i), (ii) and (iii) are all in the negative, the commanding officer is to attach a concise statement of the circumstances surrounding the accident or injury.

N.B. - See instruction 8 before completing the following section.

(b) If the answer to (a)(ii) is in the affirmative; state

(i) By whom was the game, etc., supervised and under whose authority?.....
.....

(ii) The nature of the game, etc. (e.g., hockey, baseball, etc.).....

(iii) was the officer or airman detailed to take part in it (a) as a member of an air force team,

or (b) to compete as an individual?.....

NOTE:- Questions (iv) to (vi) to be answered in addition only if the injury was sustained at practice.

(iv) For what service event was the practice held?.....

(v) Was the officer or airman a selected representative of an air force unit practising under authority?.....

(vi) If so, under what authority and supervision?.....

(c) If sustained in a game, etc., but not in an organized game, state if there are any special circumstances which should be taken into account if and when the question of attributability comes to be

decided by the Canadian Pension Commission.....

N.B. - See instruction 12 before completing the following section.

(d) Was the injury due to his own fault, i.e., did it arise from negligence, wilful disobedience of

orders, misconduct, or any blameworthy cause within his own control?..... No

If so, state in what way.....

(e) Was anyone else to blame? If so, give name and particulars..... YES - 16255 LAC Villeneuve JLH

(f) Is the accident being investigated by
(i) Court of inquiry? If so, state date and place..... No

(ii) An investigating officer?..... YES - Provost Investigation

SIGNATURE..... (RAB Ellis) F/L

DATE..... 26 Feb 51 for COMMANDING OFFICER RCAF Stn Clinton Ont..... 000934

I N S T R U C T I O N S

1. This form is to be rendered as soon as possible after the event in the following cases depending on the personnel involved.

- (a) For all RCAF personnel and personnel of other Services attached to the RCAF

In all cases of accident or self-inflicted injuries involving:

- (i) death;
- (ii) absence from duty of 48 hours or more;
- (iii) absence from duty of less than 48 hours, when the medical officer (who should invariably be consulted) advises that the injury may be the exciting cause of disability later; and
- (iv) In all flying accidents which result in the flying category of an individual being changed, or in which any injury is suffered by personnel who are occupants of an aircraft, or who have jumped or fallen from a moving aircraft or who are struck by a moving aircraft or propeller.

The requirements of para 1(a)(iv) do not apply to personnel of other Services attached to the RCAF.

2. A separate form is to be used in respect of each individual affected.

3. The form is to be rendered notwithstanding the holding of a court of inquiry or investigation (see instruction 9).

- (a) Two copies of this form are to be forwarded in all cases direct to Air Force Headquarters, one copy is to be retained by the unit rendering the form, and one copy placed in the medical envelope, RCAF M 10 of the person concerned.
- (b) One copy of the form is to be forwarded to Command Headquarters for their information (but see instruction 9).
- (c) The two copies received at Air Force Headquarters are to be passed to Records officer who will forward one copy to the Canadian Pension Commission and place one copy on the document file of the person concerned.

4. Section 3 is only to be answered in cases of flying accidents described in instruction 1(a)(iv) above.

5. The statement made by the injured person in section 2 of this form should not be used as evidence against him in any subsequent disciplinary proceedings. The rendering of this form should not be delayed in the event of his being unable to make a statement, but the latter should be forwarded at the earliest opportunity.

6. No statements of witnesses are required in support of form R.78A when an accident forms the subject of a court of inquiry or an investigation under K.R. (Air) 718 or 723. Where no such inquiry is held, form R.78A must be accompanied by full statements taken by an officer or warrant officer from witnesses of the accident and signed both by the witnesses and the officer or warrant officer. When there are no witnesses, statements from any persons to whom the injured person may have mentioned his injury immediately after the occurrence should, when obtainable, be attached to the form. In the case of injury in supervised games, or other form of physical recreation, etc., when the witnesses of the accident are in agreement, the evidence of one witness only need be attached to the form, his statement being endorsed by the other witnesses in corroboration. When separate forms are rendered in accordance with instruction 2 above, a copy of the statements of witnesses is to be attached to each form.
7. In the case of an injury sustained in a supervised game, or other form of physical recreation, etc., it is most important in the interests of the injured officer or airman that the questions contained in Section 5 (b) of the form should be answered carefully and in full detail, since if and when the question of attributability of the injury to conditions of service comes to be decided under the provisions of the pension Act, that decision may be based on the information given in answer to these questions.
8. When an affirmative answer is given to Section 5 (a) (i) the statement required by Section 2 should specify the particular act of air force duty on which the officer or airman was engaged at the time the injury was received.
9. Courts of inquiry are to be held or investigations made when required under K.R. (Air) 718 and 723 regardless of the rendering of this form, but a copy of this form should be included in the proceedings of the court of inquiry or investigation for information. The proceedings will be disposed of as laid down in regulations in force at the time of reporting.
10. In addition to being reported on this form all casualties are to be reported in accordance with the procedure laid down in A.F.A.O. P4/1.
11. Section 5(d) and (e) should be answered in all cases where no further investigation is being ordered, but in cases where further investigation is to be carried out, either by court of inquiry or investigating officer, in order to establish blame, a notation to that effect should be recorded as the answer to this question.

DEPARTMENT OF VETERANS AFFAIRS

4

TREATMENT SERVICES

CASE HISTORY SUMMARY

NAME (USE CAPITAL LETTERS) KALICHUK		SERVICE NUMBER 15113
GIVEN NAMES IN FULL ALEXANDER		RANK LAC
CIVILIAN ADDRESS SIPTON, Manitoba		ADMISSION DATE 4-2-51
IF NOW SERVING—Address of UNIT R.C.A.F. Stn., GLENGON, Ont.		ADMISSION NUMBER 3827/50
AGE 27	DATE OF BIRTH 3-11-23	RELIGION R.C.
		NATIONALITY Polish
INSTITUTION Westminster Hospital, "Lo" District		PREVIOUS ADMISSION Nil
		WARD OR WING ATP-2

12

DIAGNOSES ON ADMISSION Fractured Nose	REFERRED BY
--	-------------

CONDITION ON ADMISSION	ELECTIVE <input type="checkbox"/>	SERIOUS <input type="checkbox"/>	EMERGENCY <input type="checkbox"/>
------------------------	-----------------------------------	----------------------------------	------------------------------------

SUMMARY (COMPLAINTS, PHYSICAL AND LABORATORY EXAMINATION FINDINGS, TREATMENT AND END RESULT)

This man was admitted to Hospital 4 February, 1951, following blow on his nose. X-Rays revealed fracture, but Ear, Nose and Throat Consultant did not recommend any treatment. There is still slight periorbital hematoma, but airways are clear and Patient is ready for discharge.

FINAL DIAGNOSES 1. Fractured nasal bone	NOMENCLATURE CODE 2160-416
--	-------------------------------

OPERATIONS	A N E S T H E T I C
DISPOSAL DATE 8-2-51	CONDITION AT DISPOSAL RECOVER-ED <input type="checkbox"/> IMPROV-ED <input type="checkbox"/> NOT IMPROVED <input type="checkbox"/> DIED <input type="checkbox"/> DIAGNOSES ONLY <input type="checkbox"/>
DISPOSAL HOME <input type="checkbox"/> UNIT <input type="checkbox"/> * OUT-PATIENT <input checked="" type="checkbox"/>	TRANSFERRED TO

RECOMMENDATIONS FOR FURTHER TREATMENT, CONVALESCENCE, LIMITATIONS AS TO WORK, ETC.

He can return to Duty.

DATE LIKELY FIT FOR WORK	SIGNATURE OF PHYSICIAN (Sgd.) L.P. Kelden, M.D. 000937
--------------------------	---

LPE:G

SP

TREATMENT SERVICES

CASE HISTORY SHEET

PATIENT'S NAME (USE BLOCK LETTERS) KALICHUK			SERVICE NUMBER 15115
GIVEN NAMES IN FULL Alexander			RANK LAC
CIVILIAN ADDRESS Clinton, Manitoba			ADMISSION DATE 4 FEB 51
IF NOW SERVING—ADDRESS OF UNIT RCAP Stn. Clinton			ADMISSION NUMBER 3827/50
AGE 26	DATE OF BIRTH 3.11.25	RELIGION R.C.	NATIONALITY Polish
INSTITUTION Westminster Hospital, "10"			PREVIOUS ADMISSION nil
			WARD OR WING ATP 2

PENSIONABLE DISABILITY

Nil

DIAGNOSIS ON ADMISSION

Fractured nose

ADMISSION NOTE

Referred in by Dr Addison, Clinton when Station M.O. not available.

CLASS

10A

Occupation..... **Supply Technician**
Employer..... **RCAP PT**

Please X-R Chest

Please refer to DENTIST

DEPARTMENTAL DISTRICT MEDICAL OFFICER

ADMITTING MEDICAL OFFICER

DR DEANE

DATE

CLINICAL NOTES WITH DOCTORS' SIGNATURES

5-2-51 CASE SHEET (EAR, NOSE AND THROAT):
This Patient was kicked in the nose Sunday morning.
On Examination: There is some deviation of the nose to the left. X-Rays show some depression of the right nasal bone. Using some 4% Cocaine in right side of nose, Patient commenced to faint. Whether this is just vasomotor instability or Cocaine reaction it is difficult to say. However, I feel any local measures to adjust this fracture will not be possible in this Patient.
Please have Dr. Babb look at his nose tomorrow afternoon, and if he thinks it requires reduction, this can be arranged then.

(Sgd.) W.H. Burnett, M.D.
Otolaryngologist

6-2-51 CASE SHEET (EAR, NOSE AND THROAT):
There is very little deformity of this man's nose today, externally. He has good nasal airways on each side. When the swelling has entirely reduced on the left side, I do not think there will be any marked deformity of his nose, and for that reason I do not think Operative interference is indicated.

(Sgd.) W.H. Burnett, M.D.
Otolaryngologist

7-2-51 This man was admitted to Hospital 4 February, 1951, following blow on his nose. X-Rays revealed fracture, but Ear, Nose and Throat Consultant did not recommend any treatment. There is still slight periorbital hematoma, but airways are clear and Patient is ready for discharge. He can return to Duty.

Final Diagnosis: 1. Fractured nasal bone 2160-416
LPW:C L.P. Walden, M.D.



DIVISION OF LABORATORIES, ONTARIO DEPT. OF HEALTH

4

12308

PATIENT #2570 *Katichub A*
LAST NAME FIRST NAME MIDDLE NAME

LAB. NO.

AGE _____ SEX _____ TREATED *13/1/53*

DATE _____ 19 _____ PREVIOUS EXAM. _____
(SPECIMEN COLLECTED)

REMARKS _____

THIS REPORT CANNOT
BE IDENTIFIED EXCEPT
BY LAB. NO.

Dr. Senior Medical Officer,
NAME OF PHYSICIAN
R.C.A.F. Station,
STREET AND NO.
Aylmer, Ontario
TOWN OR CITY

DO NOT USE THIS SPACE

SEROLOGIC REPORT
NO REACTION
(NEGATIVE)

APR - 6 1950

W. M. Wilson
M.D.

LONDON 000939

UNDERLINE: ROUTINE, PRENATAL, INDUSTRIAL, SUSPECT, FOLLOW-UP

DIRECTOR

X RAY INSPECTION OF CHEST

SECTION 1

A radiograph of the chest of

Film No. 98

Rank.....LAC.....Name.....MALICHUK, Alexander

Reg. No. 15113.....Unit.....RCAF Station, Aylmer, Ont.

Civilian Address as per Registration Card

Age 26.....Height.....Weight

Signature of Recruit

is reported as follows:—

- (a) Radiological examination does not disclose evidence of tuberculous disease of the lungs of such a nature as to indicate rejection for service in the Canadian Armed Forces except as stated below.
- (b) The transverse diameter of the heart is cms. as compared with a transverse diameter of the chest of cms.
- (c) Pathological conditions or congenital abnormalities of importance seen in the film are as under-noted. (In each instance an opinion should be expressed as to whether such was present prior to enlistment.)

ROUTINE CHEST X-RAY

NEGATIVE APPROVED

Place.....

RCAF Aylmer

Date.....

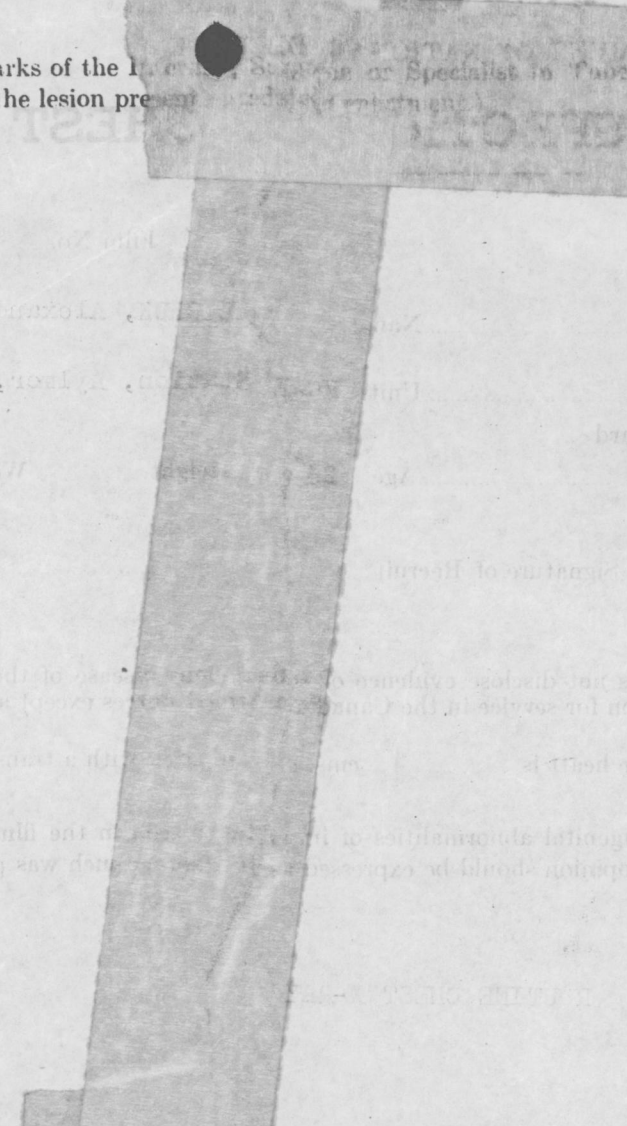
28 Feb 50

Radiologist

If a pathological condition or congenital abnormality is not observed by this method of examination, record "negative" after (c).

(OVER)

Remarks of the _____ or Specialist in Tuberculosis. State whether in your opinion the lesion present is _____



SECTION 3

Opinion of Consultant Physician and Radiologist as may be indicated by Section 2.

Conclusion.

Place

Handwritten signature and date: 28 Feb 50

Sig.....Sig.....

